

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period [07] / [01] / [2016] through [09] / [30] / [2016]

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

Signature of Treasurer *Kilgore, Paul, , ,* [Electronically Filed] Date [10] / [14] / [2016]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Team Ryan

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="701099.98"/>	<input type="text" value="701099.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1128826.53"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15933147.84"/>	<input type="text" value="48828990.82"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="17061974.37"/>	<input type="text" value="49530090.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14495132.76"/>	<input type="text" value="46963249.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2566841.61"/>	<input type="text" value="2566841.61"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

Team Ryan

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2016 To: M M / D D / Y Y Y Y 09 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12377192.27	40524833.65
(ii) Unitemized	2205845.97	3157426.06
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14583038.24	43682259.71
(b) Political Party Committees	0.00	75000.00
(c) Other Political Committees (such as PACs).....	824950.00	4511240.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15407988.24	48268499.71
12. Transfers From Affiliated/Other Party Committees.....	520160.90	554260.90
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	4998.70	6230.21
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	15933147.84	48828990.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15933147.84	48828990.82

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6639461.50	11367156.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6639461.50	11367156.83
22. Transfers to Affiliated/Other Party Committees.....	7765333.45	35134504.55
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	87837.81	454087.81
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	7500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	90337.81	461587.81
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14495132.76	46963249.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14495132.76	46963249.19

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15407988.24	48268499.71
34. Total Contribution Refunds (from Line 28(d))	90337.81	461587.81
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15317650.43	47806911.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6639461.50	11367156.83
37. Offsets to Operating Expenditures (from Line 15, page 3).....	4998.70	6230.21
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6634462.80	11360926.62

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. UHLEMEYER', GARY', , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 S. KIRKWOOD RD.
 City ST. LOUIS State MO Zip Code 63122-6018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRC INSURANCE SERVICES Occupation (for Individual) SR VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.359999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. UHLEMEYER', GARY', , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 S. KIRKWOOD RD.
 City ST. LOUIS State MO Zip Code 63122-6018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRC INSURANCE SERVICES Occupation (for Individual) SR VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420096
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. AADNESEN, CHRISTOPHER', , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 GOODNIGHT DRIVE
 City GEORGETOWN State TX Zip Code 78628-6929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGETOWN RAIL EQUIP Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380939
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 7 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 10 / 2016**
Transaction ID : SA11A.346587
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : SA11A.364147
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 10 / 2016**
Transaction ID : SA11A.393783
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ABBEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 UNIVERSITY DRIVE
 City LONGMONT State CO Zip Code 80503-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.394650
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ABBOTT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 SKYLINE BLVD
 City RENO State NV Zip Code 89509-5661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355738
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ABBOTT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 SKYLINE BLVD
 City RENO State NV Zip Code 89509-5661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380705
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ABBOTT, HOWARD, , ,

Mailing Address 3855 SKYLINE BLVD

City RENO	State NV	Zip Code 89509-5661
--------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399233

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ABBOTT, HOWARD, , ,

Mailing Address 3855 SKYLINE BLVD

City RENO	State NV	Zip Code 89509-5661
--------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399234

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ABBOTT, HOWARD, , ,

Mailing Address 3855 SKYLINE BLVD

City RENO	State NV	Zip Code 89509-5661
--------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
810.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399235

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ABBOTT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 SKYLINE BLVD
 City RENO State NV Zip Code 89509-5661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ABBOTT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 SKYLINE BLVD
 City RENO State NV Zip Code 89509-5661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407958
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ABEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 WALKERS RIDGE CT
 City PONTE VEDRA BEACH State FL Zip Code 32082-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350374
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABEL, STEPHEN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 HERITAGE HILLS DRIVE
 City WASHINGTON CROSSIN State PA Zip Code 18977-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348793
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ABEL, STEPHEN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 HERITAGE HILLS DRIVE
 City WASHINGTON CROSSIN State PA Zip Code 18977-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390274
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ABELL, JAMES, E., MR., SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7102 WELLS PARKWAY
 City UNIVERSITY PARK State MD Zip Code 20782-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **07 / 11 / 2016**
Transaction ID : SA11A.346847
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 12 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABELL, JAMES, E., MR., SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7102 WELLS PARKWAY
 City UNIVERSITY PARK State MD Zip Code 20782-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409676
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. ABLES, DENIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2032 CARRHILL RD, PO BOX 231
 City VIENNA State VA Zip Code 22183-0231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379923
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ABLES, MURIEL, E., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 E DOLLIE STREET
 City OXNARD State CA Zip Code 93033-7772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345193
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 750 E DOLLIE STREET

City OXNARD	State CA	Zip Code 93033-7772
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354138

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. ABRAHAMSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 HALEYS POND DRIVE

City ROSWELL	State GA	Zip Code 30075-3075
-----------------	-------------	------------------------

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

Name of Employer (for Individual) EQUITY PRIME MORTGAGE	Occupation (for Individual) MORTGAGE BANKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
311.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2016

Transaction ID : SA11A.344262

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. ABRAHAMSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 HALEYS POND DRIVE

City ROSWELL	State GA	Zip Code 30075-3075
-----------------	-------------	------------------------

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

Name of Employer (for Individual) EQUITY PRIME MORTGAGE	Occupation (for Individual) MORTGAGE BANKER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
311.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352492

Amount of Each Receipt this Period
177.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	486.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABRAHAMSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 135 HALEYS POND DRIVE
City ROSWELL State GA Zip Code 30075-3075
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) EQUITY PRIME MORTGAGE Occupation (for Individual) MORTGAGE BANKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 311.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355478
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ABRAHAMSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 135 HALEYS POND DRIVE
City ROSWELL State GA Zip Code 30075-3075
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) EQUITY PRIME MORTGAGE Occupation (for Individual) MORTGAGE BANKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 311.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390716
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ABRAHAM, JACK, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 87-02 PALERMO ST.
City HOLLIS State NY Zip Code 11423-1222
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413813
Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABRAMSON, GREG, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 LAKE COLONY POINTE

City BIRMINGHAM	State AL	Zip Code 35242-7412
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ABRAMSON LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.348210

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. ABRAMSON, GREG, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 LAKE COLONY POINTE

City BIRMINGHAM	State AL	Zip Code 35242-7412
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ABRAMSON LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.387018

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ABSHIRE, JORDAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2400 BELVEDERE AVE.

City CHARLOTTE	State NC	Zip Code 28205-3614
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ABSHIRE LEGAL SEARCH	Occupation (for Individual) LEGAL RECRUITER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.370654

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABUID, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 921495
 City SYLMAR State CA Zip Code 91392-1495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356321
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ABUID, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 921495
 City SYLMAR State CA Zip Code 91392-1495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380350
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ABUID, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 921495
 City SYLMAR State CA Zip Code 91392-1495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383084
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address P.O. BOX 921495

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392179

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

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

Mailing Address P.O. BOX 921495

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402843

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address P.O. BOX 921495

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402851

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ABUID, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 921495
 City SYLMAR State CA Zip Code 91392-1495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.411321
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ACHAUER, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 RIVO ALTO CANAL
 City LONG BEACH State CA Zip Code 90803-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.374046
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. ACKERMAN, MARGARET, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2731 RIVER ROAD
 City MOUNT BETHEL State PA Zip Code 18343-6115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351151
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2060.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 19 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ACKERMAN, MARGARET, D., MRS.,

Mailing Address 2731 RIVER ROAD

City MOUNT BETHEL	State PA	Zip Code 18343-6115
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : SA11A.361031

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

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

Mailing Address 31 PICARDY LN

City SAINT LOUIS	State MO	Zip Code 63124-1628
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BELTSERVICE CORP	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.402783

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ACOSTA, W., D., ,

Mailing Address 4931 ORTEGA FOREST DRIVE

City JACKSONVILLE	State FL	Zip Code 32210-8111
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016

Transaction ID : SA11A.365221

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ACUNA, SERGIO, , ,

Mailing Address 1656 BOB MURPHY DRIVE

City EL PASO	State TX	Zip Code 79936-5206
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SERGIO ACUNA INSURANCE	Occupation (for Individual) INSURANCE BROKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358353

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ACUNA, SERGIO, , ,

Mailing Address 1656 BOB MURPHY DRIVE

City EL PASO	State TX	Zip Code 79936-5206
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SERGIO ACUNA INSURANCE	Occupation (for Individual) INSURANCE BROKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382502

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ADAIR, STEFAN, , ,

Mailing Address 8303 DEERBROOK CIRCLE

City SARASOTA	State FL	Zip Code 34238-4385
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362218

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 21 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386652
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386653
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ADAIR, STEFAN, , ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016 Transaction ID : SA11A.386741
Mailing Address 8303 DEERBROOK CIRCLE		Amount of Each Receipt this Period 25.00
City SARASOTA	State FL	Zip Code 34238-4385
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ADAIR, STEFAN, , ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016 Transaction ID : SA11A.386743
Mailing Address 8303 DEERBROOK CIRCLE		Amount of Each Receipt this Period 25.00
City SARASOTA	State FL	Zip Code 34238-4385
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ADAIR, STEFAN, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.403332
Mailing Address 8303 DEERBROOK CIRCLE		Amount of Each Receipt this Period 25.00
City SARASOTA	State FL	Zip Code 34238-4385
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

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

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

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

FOR LINE NUMBER: PAGE 23 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAIR, STEFAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8303 DEERBROOK CIRCLE

City SARASOTA	State FL	Zip Code 34238-4385
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.410014

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ADAIR, STEFAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8303 DEERBROOK CIRCLE

City SARASOTA	State FL	Zip Code 34238-4385
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.410806

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ADAIR, STEFAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8303 DEERBROOK CIRCLE

City SARASOTA	State FL	Zip Code 34238-4385
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2016

Transaction ID : SA11A.412550

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418443
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ADAIR, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8303 DEERBROOK CIRCLE
 City SARASOTA State FL Zip Code 34238-4385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418446
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ADAMANY, WILLIAM, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 BUCKHEAD DR SW
 City VERO BEACH State FL Zip Code 32968-5084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422013
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 1070 BUCKHEAD DR SW

City VERO BEACH	State FL	Zip Code 32968-5084
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422016

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

Mailing Address 503 GRANDVIEW DRIVE
503

City VERONA	State PA	Zip Code 15147-4001
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386698

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

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

Mailing Address 503 GRANDVIEW DRIVE
503

City VERONA	State PA	Zip Code 15147-4001
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408910

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ADAMS, BUENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 GRANDVIEW DRIVE
 503
 City VERONA State PA Zip Code 15147-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408912
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ADAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 S HUDSON AVENUE
 City LOS ANGELES State CA Zip Code 90004-1036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369478
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. ADAMS, JOHN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 S. PENINSULA DR.
 City DAYTONA BEACH State FL Zip Code 32118-4948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380799
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 1616 S. PENINSULA DR.

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.409394

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 1616 S. PENINSULA DR.

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.409395

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 1975 PARKFRONT DRIVE
303

City MOUNT PLEASANT	State SC	Zip Code 29464-7104
------------------------	-------------	------------------------

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

Name of Employer (for Individual) GILDAN ACTIVEWEAR, INC	Occupation (for Individual) DIRECTOR OF FORECASTING
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016

Transaction ID : SA11A.359638

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 1975 PARKFRONT DRIVE
303

City MOUNT PLEASANT State SC Zip Code 29464-7104

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

Name of Employer (for Individual) GILDAN ACTIVEWEAR, INC Occupation (for Individual) DIRECTOR OF FORECASTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387060

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

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

Mailing Address 1975 PARKFRONT DRIVE
303

City MOUNT PLEASANT State SC Zip Code 29464-7104

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

Name of Employer (for Individual) GILDAN ACTIVEWEAR, INC Occupation (for Individual) DIRECTOR OF FORECASTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420168

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

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

Mailing Address 1729 LAKESHORE DR

City MANDEVILLE State LA Zip Code 70448-5916

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

Name of Employer (for Individual) CGB ENTERPRISES INC Occupation (for Individual) BUSINESS EXECUTIVE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349906

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 1729 LAKESHORE DR

City MANDEVILLE	State LA	Zip Code 70448-5916
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CGB ENTERPRISES INC	Occupation (for Individual) BUSINESS EXECUTIVE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403683

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 17567 120TH AVE

City INDIANOLA	State IA	Zip Code 50125-8835
-------------------	-------------	------------------------

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

Name of Employer (for Individual) DANLEE CORP	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386517

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 3000 BRIARCREST DR STE 508

City BRYAN	State TX	Zip Code 77802-3056
---------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367904

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAMS, ROBIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2447 HERONWOOD
 City BLOOMFIELD HILLS State MI Zip Code 48302-0838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388813
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ADAMS, ROBIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2447 HERONWOOD
 City BLOOMFIELD HILLS State MI Zip Code 48302-0838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406041
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ADAMS, ROBIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2447 HERONWOOD
 City BLOOMFIELD HILLS State MI Zip Code 48302-0838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420060
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADAMS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1072 HIGHWAY 1
 City THIBODAUX State LA Zip Code 70301-6192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EQUIPMENT HOLDING CO LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388879
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ADAMS, RONALD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6704 VINTAGE COURT R18
 City FAYETTEVILLE State NC Zip Code 28304-0493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361146
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. ADAMS, RONALD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6704 VINTAGE COURT R18
 City FAYETTEVILLE State NC Zip Code 28304-0493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394799
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 720.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 100 3RD AVENUE S UNIT 1602

City MINNEAPOLIS	State MN	Zip Code 55401-2712
---------------------	-------------	------------------------

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

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

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.369512

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 1414 GORMLY CIRCLE

City SANFORD	State NC	Zip Code 27330-8240
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTASTE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2016

Transaction ID : SA11A.358570

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

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

Mailing Address 1414 GORMLY CIRCLE

City SANFORD	State NC	Zip Code 27330-8240
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTASTE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SA11A.367209

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADELSON, MIRIAM, , DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 410 S RAMPART BLVD, STE 440

City LAS VEGAS	State NV	Zip Code 89145-5749
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41100.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.367879

Amount of Each Receipt this Period
41100.00

Memo Item CONTRIBUTION

B. ADELSON, SHELDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 410 S RAMPART BLVD STE 440

City LAS VEGAS	State NV	Zip Code 89145-5749
-------------------	-------------	------------------------

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

Name of Employer (for Individual) VENETIAN HOTEL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41100.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.367878

Amount of Each Receipt this Period
41100.00

Memo Item CONTRIBUTION

C. ADKINS, HOWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5110 E CLOCKTOWER LANE
APT #261

City MERIDIAN	State ID	Zip Code 83642-
------------------	-------------	--------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 21 / 2016
Transaction ID : SA11A.352424

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	82300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADKINS, HOWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5110 E CLOCKTOWER LANE
APT #261

City MERIDIAN State ID Zip Code 83642-

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375933

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. ADOLPH, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14086 PAUMA VISTA DRIVE

City VALLEY CENTER State CA Zip Code 92082-3917

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

Name of Employer (for Individual) RADISYS Occupation (for Individual) MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418377

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

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

Mailing Address 46 WEXFORD CLUB DR

City HILTON HEAD State SC Zip Code 29928-3356

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386863

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

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

FOR LINE NUMBER: PAGE 35 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AGANS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 WEXFORD CLUB DR
 City HILTON HEAD State SC Zip Code 29928-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405842
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. AGEE, LLOYD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 142 DRAGONFLY CIR
 City GENESEO State IL Zip Code 61254-9213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357970
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. AGNEW, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3588 WINDJAMMER CIRCLE, APT 1804
 City NAPLES State FL Zip Code 34112-4287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377642
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. AGNOR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10708 NE 90TH CT
 City VANCOUVER State WA Zip Code 98662-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SENIOR CONNECTIONS Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384354
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. AGNOR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10708 NE 90TH CT
 City VANCOUVER State WA Zip Code 98662-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SENIOR CONNECTIONS Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386058
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. AGNOR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10708 NE 90TH CT
 City VANCOUVER State WA Zip Code 98662-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SENIOR CONNECTIONS Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386061
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AGOSTINI, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 942 SLEEPY HOLLOW ROAD
 City GOLDEN State CO Zip Code 80401-8037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.397227
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. AGOSTINELLI, GUY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 LAKEMONT CT
 City EAST AMHERST State NY Zip Code 14051-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZDARSKY SAWICKI & AGOSTINELLI Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.383552
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. AHERN, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6654 LA JOLLA BOUEVARD
 City LA JOLLA State CA Zip Code 92037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AHERN AGNBUSINESS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348134
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6650.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 38 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AHLBORN, HEIDI, , ,

Mailing Address 310 GLENWOOD ROAD

City RIDGEWOOD State NJ Zip Code 07450-1332

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.370591

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AHLBORN, HEIDI, , ,

Mailing Address 310 GLENWOOD ROAD

City RIDGEWOOD State NJ Zip Code 07450-1332

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.408645

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AHLBORN, HEIDI, , ,

Mailing Address 310 GLENWOOD ROAD

City RIDGEWOOD State NJ Zip Code 07450-1332

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.422954

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 2505 ANTHEM VILLAGE DR E383

City HENDERSON	State NV	Zip Code 89052-5505
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MIDWAY FIRD TRUCK CENTER	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372470

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 2505 ANTHEM VILLAGE DR E383

City HENDERSON	State NV	Zip Code 89052-5505
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MIDWAY FIRD TRUCK CENTER	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399850

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 3066 BIRD LANE

City WINDERMERE	State FL	Zip Code 34786-8349
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370393

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 3066 BIRD LANE

City WINDERMERE	State FL	Zip Code 34786-8349
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.370395

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 3066 BIRD LANE

City WINDERMERE	State FL	Zip Code 34786-8349
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.370402

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 3066 BIRD LANE

City WINDERMERE	State FL	Zip Code 34786-8349
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BIOZONE SCIENTIFIC INTERNATIONAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016

Transaction ID : SA11A.400204

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 13232 W MICHELTIRENA DR

City SUN CITY WEST	State AZ	Zip Code 85375-1612
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
706.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11A.346918

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 13232 W MICHELTIRENA DR

City SUN CITY WEST	State AZ	Zip Code 85375-1612
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
706.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359941

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

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

Mailing Address 13232 W MICHELTIRENA DR

City SUN CITY WEST	State AZ	Zip Code 85375-1612
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
706.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365752

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	159.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AIKEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13232 W MICHELTIRENA DR
 City SUN CITY WEST State AZ Zip Code 85375-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368345
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. AIKEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13232 W MICHELTIRENA DR
 City SUN CITY WEST State AZ Zip Code 85375-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368346
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. AIKEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13232 W MICHELTIRENA DR
 City SUN CITY WEST State AZ Zip Code 85375-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368347
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 43 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AIKEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13232 W MICHELTIRENA DR
 City SUN CITY WEST State AZ Zip Code 85375-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372483
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. AIKEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13232 W MICHELTIRENA DR
 City SUN CITY WEST State AZ Zip Code 85375-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384770
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. AIKEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13232 W MICHELTIRENA DR
 City SUN CITY WEST State AZ Zip Code 85375-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393636
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 159.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 13232 W MICHELTIRENA DR

City SUN CITY WEST	State AZ	Zip Code 85375-1612
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
706.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.403405

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 13232 W MICHELTIRENA DR

City SUN CITY WEST	State AZ	Zip Code 85375-1612
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
706.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Transaction ID : SA11A.419619

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

C. AIKIN, PATRICIA, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11545 N. PA BE SHAN TRAIL

City CHARLEVOIX	State MI	Zip Code 49720-2113
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.414040

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	259.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 45 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AIKIN, PATRICIA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11545 N. PA BE SHAN TRAIL
 City CHARLEVOIX State MI Zip Code 49720-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414043
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. AIKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62A ARROW ROAD
 City HILTON HEAD ISLAND State SC Zip Code 29928-7338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL KING AIKMAN Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349163
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. AIKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62A ARROW ROAD
 City HILTON HEAD ISLAND State SC Zip Code 29928-7338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL KING AIKMAN Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349164
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 46 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AIKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62A ARROW ROAD
 City HILTON HEAD ISLAND State SC Zip Code 29928-7338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL KING AIKMAN Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374652
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. AIKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62A ARROW ROAD
 City HILTON HEAD ISLAND State SC Zip Code 29928-7338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL KING AIKMAN Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399739
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. AIKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62A ARROW ROAD
 City HILTON HEAD ISLAND State SC Zip Code 29928-7338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL KING AIKMAN Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419108
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348692

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355511

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356254

Amount of Each Receipt this Period
147.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	347.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		16		2016

Transaction ID : SA11A.368652

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2016

Transaction ID : SA11A.378914

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2016

Transaction ID : SA11A.378915

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2016

Transaction ID : SA11A.383065

Amount of Each Receipt this Period
147.00

Memo Item
CONTRIBUTION

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : SA11A.396645

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address P O BOX 3908

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1838.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11A.415721

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	497.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AINSWORTH, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2615 GREENWAY DR

City MCKINNEY	State TX	Zip Code 75070-4390
------------------	-------------	------------------------

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

Name of Employer (for Individual) MUNCK WILSON MANDALA, LLP	Occupation (for Individual) CFO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.418818

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 13672 TYPEE WAY

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : SA11A.352000

Amount of Each Receipt this Period
110.00

Memo Item
CONTRIBUTION

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

Mailing Address 13672 TYPEE WAY

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016

Transaction ID : SA11A.375990

Amount of Each Receipt this Period
110.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	470.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AITKEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13672 TYPEE WAY
 City IRVINE State CA Zip Code 92620-3270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401416
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. AKERMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 WESTPOINT RD
 City LAKE OSWEGO State OR Zip Code 97034-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.377459
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. AKERMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 WESTPOINT RD
 City LAKE OSWEGO State OR Zip Code 97034-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380473
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AKERMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 WESTPOINT RD
 City LAKE OSWEGO State OR Zip Code 97034-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380476
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. AKERMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 WESTPOINT RD
 City LAKE OSWEGO State OR Zip Code 97034-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.422753
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AKERS, C. SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 TUXEDO ROAD NW
 City ATLANTA State GA Zip Code 30305-1047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387578
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALBANESE, LOUIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 REDWOOD DR
 City SANTA CRUZ State CA Zip Code 95060-1261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403430
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ALBERT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3938 GLENDENNING RD
 City DOWNERS GROVE State IL Zip Code 60515-2229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST CENTRAL ANESTHESIA GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362427
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ALBERT, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1018 WATEREDGE PLACE
 City HEWLETT State NY Zip Code 11557-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.404612
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALBRITTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 JAMESTOWN DRIVE
 City MONTGOMERY State AL Zip Code 36111-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366808
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ALBRITTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 JAMESTOWN DRIVE
 City MONTGOMERY State AL Zip Code 36111-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385911
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ALDEAN, SHELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 BOHR ROAD
 City CARSON CITY State NV Zip Code 89706-0437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404838
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALDEAN, SHELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 BOHR ROAD
 City CARSON CITY State NV Zip Code 89706-0437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407777
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ALDERSON, CARMEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7510 MAISONS COURT
 City INDIANAPOLIS State IN Zip Code 46278-1582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349611
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ALDERSON, CARMEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7510 MAISONS COURT
 City INDIANAPOLIS State IN Zip Code 46278-1582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379619
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALDRIDGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 QUAIL DRIVE
 City BELLEVUE State NE Zip Code 68123-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 07 / 21 / 2016
Transaction ID : SA11A.353949
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

B. ALDRIDGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 QUAIL DRIVE
 City BELLEVUE State NE Zip Code 68123-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 08 / 17 / 2016
Transaction ID : SA11A.370517
 Amount of Each Receipt this Period: 50.00
 Memo Item CONTRIBUTION

C. ALDRIDGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 QUAIL DRIVE
 City BELLEVUE State NE Zip Code 68123-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 08 / 29 / 2016
Transaction ID : SA11A.382237
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALDRIDGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 QUAIL DRIVE
 City BELLEVUE State NE Zip Code 68123-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406093
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ALDRIDGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 QUAIL DRIVE
 City BELLEVUE State NE Zip Code 68123-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413204
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ALDRIDGE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1551 WAGON TRAIL DRIVE
 City JACKSONVILLE State OR Zip Code 97530-9842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359103
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALDRIDGE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1551 WAGON TRAIL DRIVE
 City JACKSONVILLE State OR Zip Code 97530-9842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372145
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ALDRIDGE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1551 WAGON TRAIL DRIVE
 City JACKSONVILLE State OR Zip Code 97530-9842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALDRIDGE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1551 WAGON TRAIL DRIVE
 City JACKSONVILLE State OR Zip Code 97530-9842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372150
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALEXANDER, JAMES, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 JEFFREY PINE LANE
 City CARSON CITY State NV Zip Code 89705-6837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER ENERGY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353336
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. ALEXANDER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 831
 City AURORA State IL Zip Code 60507-0831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEXANDER LUMBER Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397301
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ALFIERI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 381 BEECHNUT HILL DR
 City AKRON State OH Zip Code 44333-8312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROYAL BANK OF CANADA Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411811
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1950.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 60 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALFONSO, MATIAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3130 CYPRESS POINT DRIVE
 City MISSOURI CITY State TX Zip Code 77459-3358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLUOR CORP Occupation (for Individual) PROJECT MANAGER/ENGINEER
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359699
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. ALFORD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1528 DONOVAN
 City GONZALES State TX Zip Code 78629-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GONZALES I. S.D. Occupation (for Individual) LICENSED SPECIALIST IN SCHOOL I
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413709
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. ALLEMAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27200 TOURNEY ROAD STE 475
 City VALENCIA State CA Zip Code 91355-5903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KKAJ LLP Occupation (for Individual) CPA
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.380935
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 156 WOODSTOCK AVENUE

City KENILWORTH	State IL	Zip Code 60043-1235
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SLOAN VALVE	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.360905

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

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

Mailing Address 156 WOODSTOCK AVENUE

City KENILWORTH	State IL	Zip Code 60043-1235
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SLOAN VALVE	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379664

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 713 WAKEFIELD CT

City EL PASO	State TX	Zip Code 79922-2127
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3747.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350020

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 713 WAKEFIELD CT

City EL PASO	State TX	Zip Code 79922-2127
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3747.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353537

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. ALLEN, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 713 WAKEFIELD CT

City EL PASO	State TX	Zip Code 79922-2127
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3747.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356340

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. ALLEN, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 713 WAKEFIELD CT

City EL PASO	State TX	Zip Code 79922-2127
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3747.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : SA11A.366745

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3747.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368441
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3747.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374337
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3747.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374338
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3747.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374452
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3747.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374456
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT
 City EL PASO State TX Zip Code 79922-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3747.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383093
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ALLEN, HAROLD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 16 / 2016
Mailing Address 713 WAKEFIELD CT		Transaction ID : SA11A.398774
City EL PASO	State TX	Zip Code 79922-2127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3747.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ALLEN, HAROLD, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2016
Mailing Address 713 WAKEFIELD CT		Transaction ID : SA11A.411262
City EL PASO	State TX	Zip Code 79922-2127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3747.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ALLEN, MARK, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 03 / 2016
Mailing Address 8654 SW MULEDEER DR.		Transaction ID : SA11A.360267
City BEAVERTON	State OR	Zip Code 97007-6453
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) NIKE	Occupation (for Individual) EXECUTIVE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

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

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

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

FOR LINE NUMBER: PAGE 66 OF 5722
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 ASHLAND AVENUE
 City RIVER FOREST State IL Zip Code 60305-1032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 11 / 2016**
Transaction ID : SA11A.346790
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. ALLEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 CRESTWOOD COURT
 City CORTLAND State NY Zip Code 13045-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XEROX Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372496
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALLEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 CRESTWOOD COURT
 City CORTLAND State NY Zip Code 13045-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XEROX Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372497
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 67 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 CRESTWOOD COURT
 City CORTLAND State NY Zip Code 13045-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XEROX Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399902
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. ALLEN, SHELBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 MONTROSE BOULEVARD UNIT 801
 City HOUSTON State TX Zip Code 77006-4648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389508
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. ALLER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 EAST 7TH STREET
 City LANSDALE State PA Zip Code 19446-2619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTERN REVENUE, INC Occupation (for Individual) SPECIAL PROJECTS COORDINATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401215
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 39 EAST 7TH STREET

City LANSDALE	State PA	Zip Code 19446-2619
------------------	-------------	------------------------

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

Name of Employer (for Individual) EASTERN REVENUE, INC	Occupation (for Individual) SPECIAL PROJECTS COORDINATOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410225

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 39 EAST 7TH STREET

City LANSDALE	State PA	Zip Code 19446-2619
------------------	-------------	------------------------

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

Name of Employer (for Individual) EASTERN REVENUE, INC	Occupation (for Individual) SPECIAL PROJECTS COORDINATOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410227

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 39 EAST 7TH STREET

City LANSDALE	State PA	Zip Code 19446-2619
------------------	-------------	------------------------

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

Name of Employer (for Individual) EASTERN REVENUE, INC	Occupation (for Individual) SPECIAL PROJECTS COORDINATOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418953

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLISON, DIRK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1113 LONG ISLES LANE

City LEWISVILLE	State TX	Zip Code 75056-5426
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ADDUS HOMECARE	Occupation (for Individual) PRESIDENT AND CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411156

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 1707 W. 120TH. CT

City JENKS	State OK	Zip Code 74037-
---------------	-------------	--------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368827

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 1707 W. 120TH. CT

City JENKS	State OK	Zip Code 74037-
---------------	-------------	--------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368833

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 12OTH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397575
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 12OTH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398717
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 12OTH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407420
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 120TH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407424
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 120TH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409202
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 120TH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409205
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 72 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 120TH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409206
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 120TH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413665
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ALLISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 W. 120TH. CT
 City JENKS State OK Zip Code 74037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) FRANCHISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422510
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 73 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLOCCA, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 OLD CHESTER ROAD
 City CHESTER State NJ Zip Code 07930-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415997
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

B. ALLOCCA, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 OLD CHESTER ROAD
 City CHESTER State NJ Zip Code 07930-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415998
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

C. ALLOR, SHERIDA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 BISHOP ROAD
 City GROSSE POINTE PARK State MI Zip Code 48230-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396241
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLRED, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4961 KATELLA AVENUE
 City CYPRESS State CA Zip Code 90720-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.395106
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. ALLRED, RICHARD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3721 REDWOOD FARM DRIVE
 City VIRGINIA BEACH State VA Zip Code 23452-4640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383355
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ALLSPACH, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4654 SPRUCE
 City BELLAIRE State TX Zip Code 77401-3608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353266
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 4654 SPRUCE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357493

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 4654 SPRUCE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374600

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 4654 SPRUCE

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382798

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALLSPACH, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4654 SPRUCE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399587

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ALLYN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 GULF SHORE BOULEVARD N

City NAPLES	State FL	Zip Code 34102-5550
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.367160

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ALMAHDI, FAISAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CYPRESS DRIVE

City WOODBURY	State NY	Zip Code 11797-1521
------------------	-------------	------------------------

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

Name of Employer (for Individual) NEWPORT PAINTING	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357445

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALMQUIST, ROBERT, E., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4527 MAGNOLIA BRIDGE ROAD

City CHARLOTTE	State NC	Zip Code 28210-4337
-------------------	-------------	------------------------

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

Name of Employer (for Individual) CARMEL FAMILY PHYSICIANS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SA11A.378631

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

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

Mailing Address 406 CHILDS STREET

City WHEATON	State IL	Zip Code 60187-5040
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MAAC MACHINERY	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2016

Transaction ID : SA11A.353752

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ALPHIN, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2510 STAFFORD AVENUE

City RALEIGH	State NC	Zip Code 27607-7243
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2016

Transaction ID : SA11A.400463

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.353030

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. ALSAKER, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2342 S BARKER RD

City GREENACRES	State WA	Zip Code 99016-9762
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ALSAKER CORP.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379390

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. ALTER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3334 E COAST HWY STE 410
STE 410

City CORONA DEL MAR	State CA	Zip Code 92625-2328
------------------------	-------------	------------------------

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

Name of Employer (for Individual) SEAVIEW INVESTORS	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11A.346976

Amount of Each Receipt this Period
8000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALTHAUS, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5786 SHADY HOLLOW LN
 City CINCINNATI State OH Zip Code 45230-5125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHERZINGER CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386516
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ALTMAN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GROVE ISLE DRIVE 502
 City MIAMI State FL Zip Code 33133-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTH MIAMI CEITICARE Occupation (for Individual) EMERGENCY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386766
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALTMAN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GROVE ISLE DRIVE 502
 City MIAMI State FL Zip Code 33133-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTH MIAMI CEITICARE Occupation (for Individual) EMERGENCY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400045
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403180

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

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

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403198

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

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

Mailing Address 2 GROVE ISLE DRIVE
502

City MIAMI State FL Zip Code 33133-4119

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403199

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALTMAN, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 634 TEXAS STAR DRIVE
 City RICHMOND State TX Zip Code 77469-5882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409564
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ALTSCHULER, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PEMBROKE RD
 City SUMMIT State NJ Zip Code 07901-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIED BEVERAGE GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387964
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ALTSCHULER, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PEMBROKE RD
 City SUMMIT State NJ Zip Code 07901-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIED BEVERAGE GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412386
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 82 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALVAREZ, IRMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 BONITA RD.
 146
 City BONITA State CA Zip Code 91902-1442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359907
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. ALVAREZ, IRMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 BONITA RD.
 146
 City BONITA State CA Zip Code 91902-1442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384758
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. ALVAREZ, IRMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 BONITA RD.
 146
 City BONITA State CA Zip Code 91902-1442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419639
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 83 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALVES, ANGELO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1646 S BELCHER ROAD
 City CLEARWATER State FL Zip Code 33764-6517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392509
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. AMAYA, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1233 ABBERLY CIRCLE
 City ARCADIA State OK Zip Code 73007-7019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388694
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AMAYA, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1233 ABBERLY CIRCLE
 City ARCADIA State OK Zip Code 73007-7019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399274
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. AMBROSON, DEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 JAMES ST.
 City JESUP State IA Zip Code 50648-1128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITYPOINT HEALTH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372418
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. AMBROSON, DEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 JAMES ST.
 City JESUP State IA Zip Code 50648-1128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITYPOINT HEALTH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382604
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. AMBROSON, DEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 JAMES ST.
 City JESUP State IA Zip Code 50648-1128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITYPOINT HEALTH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383251
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMBROSON, DEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 JAMES ST.
 City JESUP State IA Zip Code 50648-1128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITYPOINT HEALTH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. AMBROSON, DEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 JAMES ST.
 City JESUP State IA Zip Code 50648-1128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITYPOINT HEALTH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410933
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AMECHE, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 UPLANDS WAY SE
 City NORTH BEND State WA Zip Code 98045-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388941
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38951 LAUBA ROAD
 City TEMECULA State CA Zip Code 92592-9060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERMAN RACING LLC Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417188
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. AMON, SIMEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 NORMANDY ROAD
 City LARCHMONT State NY Zip Code 10538-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397009
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357444
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2775.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 87 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368240
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384407
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. AMPOLINI, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD, UNIT 401
 City MCLEAN State VA Zip Code 22101-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385184
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. AMPOLINI, JACQUES, , ,			Date of Receipt MM / DD / YYYY 09 / 06 / 2016 Transaction ID : SA11A.391146		
Mailing Address 6800 FLEETWOOD ROAD, UNIT 401			Amount of Each Receipt this Period 30.00		
City MCLEAN	State VA	Zip Code 22101-3604	Memo Item CONTRIBUTION <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. AMPOLINI, JACQUES, , ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2016 Transaction ID : SA11A.413127		
Mailing Address 6800 FLEETWOOD ROAD, UNIT 401			Amount of Each Receipt this Period 25.00		
City MCLEAN	State VA	Zip Code 22101-3604	Memo Item CONTRIBUTION <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ANCONE, LAUREL, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.402437		
Mailing Address 8850 OLD MILL CREEK RD			Amount of Each Receipt this Period 250.00		
City BRENHAM	State TX	Zip Code 77833-1426	Memo Item CONTRIBUTION <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANCONE, LAUREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8850 OLD MILL CREEK RD
 City BRENHAM State TX Zip Code 77833-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407627
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ANDERSON, ALLEN, F., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4230 HARDING PIKE
 City NASHVILLE State TN Zip Code 37205-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414740
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ANDERSON, BETTY-ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31745 MUSCOVY RD
 City HARTLAND State WI Zip Code 53029-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400811
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 31745 MUSCOVY RD

City HARTLAND State WI Zip Code 53029-

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016

Transaction ID : SA11A.400812

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 2021 HUNTINGTON LANE

City FORT WORTH State TX Zip Code 76110-1743

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
834.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016

Transaction ID : SA11A.356252

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

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

Mailing Address 2021 HUNTINGTON LANE

City FORT WORTH State TX Zip Code 76110-1743

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
834.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016

Transaction ID : SA11A.383008

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 HUNTINGTON LANE
 City FORT WORTH State TX Zip Code 76110-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 834.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389447
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDERSON, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 HUNTINGTON LANE
 City FORT WORTH State TX Zip Code 76110-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 834.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404912
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. ANDERSON, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 HUNTINGTON LANE
 City FORT WORTH State TX Zip Code 76110-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 834.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411294
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 92 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 HUNTINGTON LANE
 City FORT WORTH State TX Zip Code 76110-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 834.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415646
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDERSON, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 HUNTINGTON LANE
 City FORT WORTH State TX Zip Code 76110-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 834.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415664
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ANDERSON, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 HUNTINGTON LANE
 City FORT WORTH State TX Zip Code 76110-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 834.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415666
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 KELSEY TER
 City MINNEAPOLIS State MN Zip Code 55436-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.343877
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. ANDERSON, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 STRONG RD
 City VICTOR State NY Zip Code 14564-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353528
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANDERSON, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 STRONG RD
 City VICTOR State NY Zip Code 14564-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366655
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANDERSON, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 STRONG RD
 City VICTOR State NY Zip Code 14564-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404895
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDERSON, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 STRONG RD
 City VICTOR State NY Zip Code 14564-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404898
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ANDERSON, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 STRONG RD
 City VICTOR State NY Zip Code 14564-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404902
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 95 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 STRONG RD
 City VICTOR State NY Zip Code 14564-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404903
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDERSON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 563 S PERALTA HILLS DRIVE
 City ANAHEIM State CA Zip Code 92807-3520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDERSON SEAFOODS INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396980
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ANDERSON, CLIFFORD, I., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 KELSEY TER
 City MINNEAPOLIS State MN Zip Code 55436-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401636
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6450.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANDERSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6650 75TH AVENUE NE
 City STARKWEATHER State ND Zip Code 58377-9635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392593
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ANDERSON, DAVID, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 7300
 City INCLINE VILLAGE State NV Zip Code 89450-7300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BDC ANDROON, LLC Occupation (for Individual) HEALTHCARE COMONLTENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2016
Transaction ID : SA11A.346186
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. ANDERSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 HERITAGE DR
 City PAWLEYS ISLAND State SC Zip Code 29585-6550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386663
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 97 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6337 GLEN HOLLOW DRIVE
 City LIBERTY TWP State OH Zip Code 45011-0442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1122.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349678
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ANDERSON, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6337 GLEN HOLLOW DRIVE
 City LIBERTY TWP State OH Zip Code 45011-0442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1122.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352553
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ANDERSON, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6337 GLEN HOLLOW DRIVE
 City LIBERTY TWP State OH Zip Code 45011-0442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1122.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352554
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 6337 GLEN HOLLOW DRIVE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1122.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374733

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

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

Mailing Address 6618 MCKAKIN COURT

City COLLEYVILLE	State TX	Zip Code 76034-5752
---------------------	-------------	------------------------

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

Name of Employer (for Individual) PCPMG	Occupation (for Individual) HEALTH CARE MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408440

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 3110 VAN AVENUE NE UNIT 8
NO8 NE

City ALEXANDRIA	State MN	Zip Code 56308-1690
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.346283

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, HARRY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3110 VAN AVENUE NE UNIT 8
 NO8 NE
 City ALEXANDRIA State MN Zip Code 56308-1690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364526
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDERSON, HARRY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3110 VAN AVENUE NE UNIT 8
 NO8 NE
 City ALEXANDRIA State MN Zip Code 56308-1690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392984
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANDERSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ABNER CRUZE ROAD
 City KNOXVILLE State TN Zip Code 37920-6371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF TENNESSEE Occupation (for Individual) FOREMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354692
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

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

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ABNER CRUZE ROAD
 City KNOXVILLE State TN Zip Code 37920-6371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF TENNESSEE Occupation (for Individual) FOREMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377441
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDERSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ABNER CRUZE ROAD
 City KNOXVILLE State TN Zip Code 37920-6371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF TENNESSEE Occupation (for Individual) FOREMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405127
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ANDERTON, JAMES, F., , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 02555 EAGLE ISLAND ROAD
 City BOYNE CITY State MI Zip Code 49712-9330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAPLEGROVE PROPERTY MANAGEMENT Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406688
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, JAMES, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 AUBURN AVE SE
 City NORTH CANTON State OH Zip Code 44709-1187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERHARD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404919
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354733
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366636
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377442
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409490
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413613
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 HEALEY BLVD
 City ALPINE State UT Zip Code 84004-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413617
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDERSON, JOHN, E., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 485 TUALLITAN RD
 City LOS ANGELES State CA Zip Code 90049-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACE BEVERAGE Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346084
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ANDERSON, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5926 S FARM ROAD 101
 City REPUBLIC State MO Zip Code 65738-9108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413557
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 104 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, LEONARD, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18DOLCE LUNA CT
 City HENDERSON State NV Zip Code 89011-2607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDENATEUSA Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359898
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDERSON, LEONARD, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18DOLCE LUNA CT
 City HENDERSON State NV Zip Code 89011-2607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDENATEUSA Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384755
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANDERSON, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 VEASEY SHORE ROAD
 City MEREDITH State NH Zip Code 03253-7127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350263
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 105 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 VEASEY SHORE ROAD
 City MEREDITH State NH Zip Code 03253-7127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412669
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDERSON, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 VEASEY SHORE ROAD
 City MEREDITH State NH Zip Code 03253-7127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412681
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANDERSON, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 76 VIA SANTA MARIA
 City SAN CLEMENTE State CA Zip Code 92672-9491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368114
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 106 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSEN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 196 GRAND OAKS DR.
City GLENDORA State CA Zip Code 91741-3912
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ANDERSEN PLUMBING Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402307
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. ANDERSON, RALPH, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4469 SUMMIT RIDGE ROAD
City COLUMBUS State OH Zip Code 43220-2248
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358620
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. ANDERSON, RICHARD, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6903 SE RIVERSIDE DR 15
City VANCOUVER State WA Zip Code 98664-1664
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CADET MFG CO Occupation (for Individual) CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348544
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 107 OF 5722
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 6903 SE RIVERSIDE DR
15

City VANCOUVER State WA Zip Code 98664-1664

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

Name of Employer (for Individual) CADET MFG CO Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
08 / 18 / 2016

Transaction ID : SA11A.372699

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 6903 SE RIVERSIDE DR
15

City VANCOUVER State WA Zip Code 98664-1664

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

Name of Employer (for Individual) CADET MFG CO Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
08 / 31 / 2016

Transaction ID : SA11A.386470

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 6903 SE RIVERSIDE DR
15

City VANCOUVER State WA Zip Code 98664-1664

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

Name of Employer (for Individual) CADET MFG CO Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
09 / 06 / 2016

Transaction ID : SA11A.389559

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, RICHARD, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6903 SE RIVERSIDE DR
 15
 City VANCOUVER State WA Zip Code 98664-1664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CADET MFG CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399919
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ANDERSON, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20835 SAXON CT
 City BROOKFIELD State WI Zip Code 53045-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404608
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ANDERSON, TOM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 DOWLER DR
 City EUREKA State CA Zip Code 95501-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358351
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 109 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **951 DOWLER DR**

City **EUREKA** State **CA** Zip Code **95501-1216**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
08 / 09 / 2016
Transaction ID : SA11A.363832

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address **951 DOWLER DR**

City **EUREKA** State **CA** Zip Code **95501-1216**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
08 / 20 / 2016
Transaction ID : SA11A.376070

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address **951 DOWLER DR**

City **EUREKA** State **CA** Zip Code **95501-1216**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.382497

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDERSON, TOM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 DOWLER DR
 City EUREKA State CA Zip Code 95501-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408340
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDERSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 739 HAVENWOOD CIRCLE DRIVE
 City SAINT LOUIS State MO Zip Code 63122-1424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364305
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ANDES, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 WEST CHESTNUT ST.
 City SAINT MICHAELS State MD Zip Code 21663-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357125
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDES, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 WEST CHESTNUT ST.
 City SAINT MICHAELS State MD Zip Code 21663-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388853
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ANDON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 ALISA CIR NE
 City SAINT PETERSBURG State FL Zip Code 33703-4371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIC GUMS INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404376
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ANDREWS, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 BIGGS ROAD
 City COTTONTOWN State TN Zip Code 37048-4633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXIT REAL ESTATE SOLUTIONS Occupation (for Individual) REALTOR/BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390604
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 112 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDREWS, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 BIGGS ROAD
 City COTTONTOWN State TN Zip Code 37048-4633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXIT REAL ESTATE SOLUTIONS Occupation (for Individual) REALTOR/BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394266
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDREWS, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 BIGGS ROAD
 City COTTONTOWN State TN Zip Code 37048-4633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXIT REAL ESTATE SOLUTIONS Occupation (for Individual) REALTOR/BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397910
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ANDREWS, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 BIGGS ROAD
 City COTTONTOWN State TN Zip Code 37048-4633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXIT REAL ESTATE SOLUTIONS Occupation (for Individual) REALTOR/BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397919
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 5722
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDREWS, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 BIGGS ROAD
 City COTTONTOWN State TN Zip Code 37048-4633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXIT REAL ESTATE SOLUTIONS Occupation (for Individual) REALTOR/BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407787
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANDREWS, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 BIGGS ROAD
 City COTTONTOWN State TN Zip Code 37048-4633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXIT REAL ESTATE SOLUTIONS Occupation (for Individual) REALTOR/BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409775
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ANDREWS, KELLI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6605 RIMROCK DR
 City IDAHO FALLS State ID Zip Code 83401-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 647.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404760
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 114 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **32775 RANCH TRAIL**

City **SHAFFER** State **MN** Zip Code **55074-4504**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
09 / 22 / 2016

Transaction ID : SA11A.402336

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANDREWS, NANCY, , ,

Mailing Address **32775 RANCH TRAIL**

City **SHAFFER** State **MN** Zip Code **55074-4504**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
09 / 22 / 2016

Transaction ID : SA11A.402337

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

Mailing Address **1639 NE 26TH STREET #122
APT 122**

City **WILTON MANORS** State **FL** Zip Code **33305-1410**

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
08 / 15 / 2016

Transaction ID : SA11A.366196

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **550.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **41671 SUDBURY COURT**

City NOVI	State MI	Zip Code 48375-4786
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 09 / 2016

Transaction ID : SA11A.362785

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address **1409 MORAN RD**

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 25 / 2016

Transaction ID : SA11A.379919

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address **1409 MORAN RD**

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.384970

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 116 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDREWS, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN RD
 City FRANKLIN State TN Zip Code 37069-6301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408673
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANDRUS, CHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 SANDSTONE CV
 City PARK CITY State UT Zip Code 84060-6869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394783
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ANDRY III, ALLAIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 GOV. NICHOLLS ST.
 City NEW ORLEANS State LA Zip Code 70116-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 08 / 2016
Transaction ID : SA11A.346708
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANDRY III, ALLAIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 GOV. NICHOLLS ST.
 City NEW ORLEANS State LA Zip Code 70116-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411431
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ANGELES, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 S PACIFIC AVE
 City GLENDALE State CA Zip Code 91204-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICES OF MC ANGELES Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366952
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ANGELES, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 S PACIFIC AVE
 City GLENDALE State CA Zip Code 91204-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICES OF MC ANGELES Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384090
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANGELES, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 S PACIFIC AVE
 City GLENDALE State CA Zip Code 91204-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAW OFFICES OF MC ANGELES Occupation (for Individual) LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419494
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ANGLE, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 E. VIA VERDE DRIVE
 City WICHITA State KS Zip Code 67230-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397995
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ANICH, MILAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12505 E 79TH ST N
 City OWASSO State OK Zip Code 74055-7948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354699
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANICH, MILAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12505 E 79TH ST N
 City OWASSO State OK Zip Code 74055-7948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387827
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANLE, HARRISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14277 HESBY STREET
 City SHERMAN OAKS State CA Zip Code 91403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHGATE GONZALEZ, LLC Occupation (for Individual) CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt **07 / 04 / 2016**
Transaction ID : SA11A.344187
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. ANLE, HARRISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14277 HESBY STREET
 City SHERMAN OAKS State CA Zip Code 91403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHGATE GONZALEZ, LLC Occupation (for Individual) CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt **07 / 04 / 2016**
Transaction ID : SA11A.344188
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 218.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 120 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANLE, HARRISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14277 HESBY STREET
 City SHERMAN OAKS State CA Zip Code 91403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHGATE GONZALEZ, LLC Occupation (for Individual) CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350010
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ANLE, HARRISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14277 HESBY STREET
 City SHERMAN OAKS State CA Zip Code 91403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHGATE GONZALEZ, LLC Occupation (for Individual) CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376141
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ANLE, HARRISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14277 HESBY STREET
 City SHERMAN OAKS State CA Zip Code 91403-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHGATE GONZALEZ, LLC Occupation (for Individual) CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400881
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. ANNANTUONIO, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 PEASLEE CROSSING RD
 City NEWTON State NH Zip Code 03858-3806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOSTON MEDICAL CENTER Occupation (for Individual) SENIOR DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422766
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ANNESSER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 NAVA COURT
 City SOLANA BEACH State CA Zip Code 92075-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366034
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. ANSOUR, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 PARK AVENUE FLOOR 20
 City NEW YORK State NY Zip Code 10022-9306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARCH GLOBAL ADVISORS INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378592
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 5722
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
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<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANSTINE, BYRON, , ,

Mailing Address **16050 W. BAY DR.**
255

City JUPITER	State FL	Zip Code 33477-2319
------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 21 / 2016

Transaction ID : SA11A.353943

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANSTINE, BYRON, , ,

Mailing Address **16050 W. BAY DR.**
255

City JUPITER	State FL	Zip Code 33477-2319
------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 21 / 2016

Transaction ID : SA11A.375992

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANSTINE, BYRON, , ,

Mailing Address **16050 W. BAY DR.**
255

City JUPITER	State FL	Zip Code 33477-2319
------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.401417

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANTONUCCI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BEEKMAN HILL ROAD
 City ESSEX FELLS State NJ Zip Code 07021-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL CITY LEASING Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357622
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. ANTONUCCI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BEEKMAN HILL ROAD
 City ESSEX FELLS State NJ Zip Code 07021-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL CITY LEASING Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382818
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. ANTONUCCI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BEEKMAN HILL ROAD
 City ESSEX FELLS State NJ Zip Code 07021-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL CITY LEASING Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413038
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 124 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 326 BENTLEY DRIVE

City NAPLES State FL Zip Code 34110-8634

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11A.358784

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

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

Mailing Address 326 BENTLEY DRIVE

City NAPLES State FL Zip Code 34110-8634

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.369498

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

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

Mailing Address 326 BENTLEY DRIVE

City NAPLES State FL Zip Code 34110-8634

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11A.381171

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. APEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 159
 City VINEMONT State AL Zip Code 35179-0159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376450
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. APPLETON, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 SHANGRILA CIR.
 City RIVERDALE State GA Zip Code 30296-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402763
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. APPLE, CASS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 249 POLHEMUS AVENUE
 City ATHERTON State CA Zip Code 94027-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.348026
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. APPLE, CASS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 249 POLHEMUS AVENUE

City ATHERTON	State CA	Zip Code 94027-5442
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.361335

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. APPLE, CASS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 249 POLHEMUS AVENUE

City ATHERTON	State CA	Zip Code 94027-5442
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.373620

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. APPLE, CASS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 249 POLHEMUS AVENUE

City ATHERTON	State CA	Zip Code 94027-5442
------------------	-------------	------------------------

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

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

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406883

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARASI, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 PEACHTREE RD ME APT 509
 509
 City ATLANTA State GA Zip Code 30326-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLOOMBERRY RESORTS AND HOTELS INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365807
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ARASI, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 PEACHTREE RD ME APT 509
 509
 City ATLANTA State GA Zip Code 30326-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLOOMBERRY RESORTS AND HOTELS INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.394591
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ARATA, NANCY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 GREAT OAKS TRAIL
 City SAINT PAUL State MN Zip Code 55123-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEAMKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.361131
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARCHER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2421 MT CARMEL ROAD
 City COVINGTON State TN Zip Code 38019-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364193
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ARCHER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4717 SPLIT CREEK CT
 City CHESTER State VA Zip Code 23831-4336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VT IDIRECT Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ARCHER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4717 SPLIT CREEK CT
 City CHESTER State VA Zip Code 23831-4336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VT IDIRECT Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392233
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ARDANTZ, HENRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 ARROWHEAD DRIVE
 City SANTA MARIA State CA Zip Code 93455-5760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377846
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358309
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382484
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 130 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416163
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ARKWELL, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1049
 City DOVER State NH Zip Code 03821-1049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RW ASSOCIATES, INC. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350508
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. ARKWELL, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1049
 City DOVER State NH Zip Code 03821-1049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RW ASSOCIATES, INC. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405326
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 131 OF 5722
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARMELLINO, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002H LONG BEACH BOULEVARD
 City BEACH HAVEN State NJ Zip Code 08008-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378569
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ARMELLINO, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002H LONG BEACH BOULEVARD
 City BEACH HAVEN State NJ Zip Code 08008-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.394644
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ARMSTRONG, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 S SEWALL'S POINT ROAD
 City STUART State FL Zip Code 34996-6438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390243
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ARMSTRONG, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 S SEWALL'S POINT ROAD
 City STUART State FL Zip Code 34996-6438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGHI Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354468
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. ARMSTRONG, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 S SEWALL'S POINT ROAD
 City STUART State FL Zip Code 34996-6438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGHI Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365006
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. ARMSTRONG, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 S SEWALL'S POINT ROAD
 City STUART State FL Zip Code 34996-6438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGHI Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370555
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARMSTRONG, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 S SEWALL'S POINT ROAD
 City STUART State FL Zip Code 34996-6438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGHI Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384567
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. ARMSTRONG, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 STRINGS DRIVE
 City SAN ANTONIO State TX Zip Code 78216-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349711
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. ARMSTRONG, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 STRINGS DRIVE
 City SAN ANTONIO State TX Zip Code 78216-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374287
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 134 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARMSTRONG, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 STRINGS DRIVE
 City SAN ANTONIO State TX Zip Code 78216-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374756
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ARMSTRONG, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 STRINGS DRIVE
 City SAN ANTONIO State TX Zip Code 78216-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399620
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARNESON, DAVID, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46831 RANCHO HIGUERA RD
 City FREMONT State CA Zip Code 94539-7307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359777
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 135 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNESON, DAVID, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46831 RANCHO HIGUERA RD
 City FREMONT State CA Zip Code 94539-7307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359778
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ARNESON, DAVID, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46831 RANCHO HIGUERA RD
 City FREMONT State CA Zip Code 94539-7307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366645
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ARNESON, DAVID, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46831 RANCHO HIGUERA RD
 City FREMONT State CA Zip Code 94539-7307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369900
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNESON, DAVID, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46831 RANCHO HIGUERA RD

City FREMONT	State CA	Zip Code 94539-7307
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418112

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ARNO, MARY, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2520 BROADWAY SUITE 200

City SAN ANTONIO	State TX	Zip Code 78215-1149
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353737

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ARNOLD, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2802 RUMSON CT NE

City ATLANTA	State GA	Zip Code 30305-3240
-----------------	-------------	------------------------

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

Name of Employer (for Individual) IRON TREE CAPITAL	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386377

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ARNOLD, SCOTT, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.403778		
Mailing Address 2802 RUMSON CT NE			Amount of Each Receipt this Period 100.00		
City ATLANTA	State GA	Zip Code 30305-3240	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) IRON TREE CAPITAL		Occupation (for Individual) INVESTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ARNOLD, SCOTT, , ,			Date of Receipt MM / DD / YYYY 09 / 26 / 2016 Transaction ID : SA11A.407463		
Mailing Address 2802 RUMSON CT NE			Amount of Each Receipt this Period 100.00		
City ATLANTA	State GA	Zip Code 30305-3240	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) IRON TREE CAPITAL		Occupation (for Individual) INVESTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ARNOLD, SCOTT, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016 Transaction ID : SA11A.419400		
Mailing Address 2802 RUMSON CT NE			Amount of Each Receipt this Period 100.00		
City ATLANTA	State GA	Zip Code 30305-3240	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) IRON TREE CAPITAL		Occupation (for Individual) INVESTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNOUX, GALE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9614 GRETNA GREEN DRIVE
 City TAMPA State FL Zip Code 33626-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386492
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ARNOUX, GALE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9614 GRETNA GREEN DRIVE
 City TAMPA State FL Zip Code 33626-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386499
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARNOUX, GALE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9614 GRETNA GREEN DRIVE
 City TAMPA State FL Zip Code 33626-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403587
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. ARNSTEIN, BEVERLY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 LAUREL WAY
 City BEVERLY HILLS State CA Zip Code 90210-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396329
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ARTWICK, BRUCE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3345 MONTE SERENO DRIVE
 City SANTA FE State NM Zip Code 87506-0185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARTWICK CONSULTING Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414402
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ASBILL, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13319 MISSION VALLEY
 City HOUSTON State TX Zip Code 77069-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 140 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASBILL, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13319 MISSION VALLEY
 City HOUSTON State TX Zip Code 77069-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414855
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ASBILL, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13319 MISSION VALLEY
 City HOUSTON State TX Zip Code 77069-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416220
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ASBJORNSON, NORMAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 S TROOST AVENUE
 City TULSA State OK Zip Code 74114-1320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AFON Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388944
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ASBURY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 NORTH ISLAND DR
 City ATLANTA State GA Zip Code 30327-4620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN BENEFIT CORPORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355724
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

B. ASBURY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 NORTH ISLAND DR
 City ATLANTA State GA Zip Code 30327-4620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN BENEFIT CORPORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380704
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

C. ASCHERMANN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 VISTA DEL SUR PT
 City COLORADO SPRINGS State CO Zip Code 80919-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366715
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

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

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASCHERMANN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 VISTA DEL SUR PT
 City COLORADO SPRINGS State CO Zip Code 80919-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394046
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ASCHERMANN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 VISTA DEL SUR PT
 City COLORADO SPRINGS State CO Zip Code 80919-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394047
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ASH, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5812 S ATLANTA PLACE
 City TULSA State OK Zip Code 74105-7500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375177
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASHBY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2265 MORENCY DRIVE
 City RICHLAND State WA Zip Code 99352-9517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392899
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ASHLEY, JEAN, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 UNIVERSITY DRIVE APT. 22
 City MENLO PARK State CA Zip Code 94025-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.348027
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ASHLEY, JEAN, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 UNIVERSITY DRIVE APT. 22
 City MENLO PARK State CA Zip Code 94025-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.361229
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASHLEY, JEAN, D., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1330 UNIVERSITY DRIVE
APT. 22

City MENLO PARK State CA Zip Code 94025-

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
08 / 12 / 2016
Transaction ID : SA11A.365410

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. ASHLEY, JEAN, D., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1330 UNIVERSITY DRIVE
APT. 22

City MENLO PARK State CA Zip Code 94025-

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
08 / 23 / 2016
Transaction ID : SA11A.376892

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ASHLEY, JEAN, D., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1330 UNIVERSITY DRIVE
APT. 22

City MENLO PARK State CA Zip Code 94025-

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
09 / 06 / 2016
Transaction ID : SA11A.389702

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASHTON, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2502 CASTLE HEIGHTS AVE
 City LOS ANGELES State CA Zip Code 90034-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE GERSH AGENCY Occupation (for Individual) TALENT AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391762
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ASHTON, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2502 CASTLE HEIGHTS AVE
 City LOS ANGELES State CA Zip Code 90034-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE GERSH AGENCY Occupation (for Individual) TALENT AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416942
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ASHTON, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2502 CASTLE HEIGHTS AVE
 City LOS ANGELES State CA Zip Code 90034-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE GERSH AGENCY Occupation (for Individual) TALENT AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.417004
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASKEY, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 N GEORGE MASON DRIVE
 City ARLINGTON State VA Zip Code 22207-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADE & DEVELOPMENT CONSULTA/
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349874
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ASKEY, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 N GEORGE MASON DRIVE
 City ARLINGTON State VA Zip Code 22207-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADE & DEVELOPMENT CONSULT.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384608
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ASKEY, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 N GEORGE MASON DRIVE
 City ARLINGTON State VA Zip Code 22207-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADE & DEVELOPMENT CONSULTA
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384611
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 147 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASKEY, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 N GEORGE MASON DRIVE
 City ARLINGTON State VA Zip Code 22207-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADE & DEVELOPMENT CONSULT/
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401294
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ASKEY, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 N GEORGE MASON DRIVE
 City ARLINGTON State VA Zip Code 22207-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADE & DEVELOPMENT CONSULT.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416430
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388639
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388641
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399439
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404781
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 149 OF 5722
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404782
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415030
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ASMUSSEN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1543 TUCKER LANE
 City ENCINITAS State CA Zip Code 92024-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ATOMICS Occupation (for Individual) ENGINEER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415031
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 150 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASNESS, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 DEWART RD
 City GREENWICH State CT Zip Code 06830-3417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 17700.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401045
 Amount of Each Receipt this Period 17700.00
 Memo Item CONTRIBUTION

B. ASNESS, CLIFF, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 THIRD AVE., 11TH FL.
 City NEW YORK State NY Zip Code 10017-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) MANAGING PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 41100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421175
 Amount of Each Receipt this Period 41100.00
 Memo Item CONTRIBUTION

C. ASNESS, LAUREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 3RD AVENUE FLOOR 11
 City NEW YORK State NY Zip Code 10017-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 41100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421172
 Amount of Each Receipt this Period 41100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 99900.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ASPLIN, LYLE, I., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1615 HOVEDEN DRIVE
 City KATY State TX Zip Code 77450-4901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366049
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ASPLUNDH, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 WAVERLY LANE
 City BRYN ATHYN State PA Zip Code 19009-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397207
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ASPLUNDH, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 26, 653 WAVERLY
 City BRYN ATHYN State PA Zip Code 19009-0026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421937
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASSANTE, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 REALTY DRIVE
 City CHESHIRE State CT Zip Code 06410-1655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404835
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ATHERTON, MARCELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 EASTWOOD CT
 City LOS ALTOS State CA Zip Code 94024-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355736
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ATHERTON, MARCELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 EASTWOOD CT
 City LOS ALTOS State CA Zip Code 94024-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380710
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ATHERTON, MARCELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 EASTWOOD CT
 City LOS ALTOS State CA Zip Code 94024-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407980
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ATKINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8030 FRANKFORD RD. APT 1
 City DALLAS State TX Zip Code 75252-6836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346885
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ATKINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8030 FRANKFORD RD. APT 1
 City DALLAS State TX Zip Code 75252-6836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387206
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ATKINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8030 FRANKFORD RD. APT 1
 City DALLAS State TX Zip Code 75252-6836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402522
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ATKINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8030 FRANKFORD RD. APT 1
 City DALLAS State TX Zip Code 75252-6836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402524
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ATKIN, SIDNEY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 RIO VIRGIN DRIVE UNIT 247
 City SAINT GEORGE State UT Zip Code 84790-7861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381168
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ATTEBERRY, BETTY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3720 NW BRONSON CREST LOOP
 City PORTLAND State OR Zip Code 97229-7064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388897
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ATWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 WEST TYNE DRIVE
 City NASHVILLE State TN Zip Code 37205-4433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411109
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. AUDETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 MAIN ST SUITE 400
 City STAMFORD State CT Zip Code 06901-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381923
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 156 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUDETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 MAIN ST
 SUITE 400
 City STAMFORD State CT Zip Code 06901-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390150
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION

B. AUDETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 MAIN ST
 SUITE 400
 City STAMFORD State CT Zip Code 06901-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390155
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. AUDETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 MAIN ST
 SUITE 400
 City STAMFORD State CT Zip Code 06901-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390156
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUDETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 MAIN ST
 SUITE 400
 City STAMFORD State CT Zip Code 06901-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398007
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. AUDETTE, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 MAIN ST
 SUITE 400
 City STAMFORD State CT Zip Code 06901-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398008
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. AUGENSTEIN, CHARLES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DONDANVILLE RD, UNIT 601
 601
 City SAINT AUGUSTINE State FL Zip Code 32080-8047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353696
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUGENSTEIN, CHARLES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11A.355258

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. AUGENSTEIN, CHARLES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2016

Transaction ID : SA11A.366857

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368793

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUGENSTEIN, CHARLES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
08 / 24 / 2016
Transaction ID : SA11A.380174

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. AUGENSTEIN, CHARLES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
08 / 27 / 2016
Transaction ID : SA11A.382983

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
08 / 30 / 2016
Transaction ID : SA11A.384257

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 160 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUGENSTEIN, CHARLES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
09 / 06 / 2016
Transaction ID : SA11A.390530

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. AUGENSTEIN, CHARLES, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
09 / 14 / 2016
Transaction ID : SA11A.396678

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 2 DONDANVILLE RD, UNIT 601
601

City SAINT AUGUSTINE State FL Zip Code 32080-8047

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.403831

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUGENSTEIN, CHARLES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DONDANVILLE RD, UNIT 601
 601
 City SAINT AUGUSTINE State FL Zip Code 32080-8047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404843
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. AUGENSTEIN, CHARLES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DONDANVILLE RD, UNIT 601
 601
 City SAINT AUGUSTINE State FL Zip Code 32080-8047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412546
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. AUGENSTEIN, CHARLES, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 DONDANVILLE RD, UNIT 601
 601
 City SAINT AUGUSTINE State FL Zip Code 32080-8047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422098
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUGENSTEIN, MILDRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3936 GLENOAK DRIVE NE
 City LOUISVILLE State OH Zip Code 44641-8843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365953
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. AUGUST, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 399 FULLERTON PARKWAY
 City CHICAGO State IL Zip Code 60614-2876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362603
 Amount of Each Receipt this Period 220.00
 Memo Item CONTRIBUTION

C. AULD, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WINDSOR ROAD
 City HASTINGS ON HUDSON State NY Zip Code 10706-3010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412355
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	720.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 163 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 124 A AVENUE EAST

City OSKALOOSA	State IA	Zip Code 52577-2816
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ROBERT AULD INVESTMENTS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353460

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 124 A AVENUE EAST

City OSKALOOSA	State IA	Zip Code 52577-2816
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ROBERT AULD INVESTMENTS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401226

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 20160 SAINT ANDREWS DRIVE

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.383510

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 164 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUSTIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20160 SAINT ANDREWS DRIVE
 City OLYMPIA FIELDS State IL Zip Code 60461-1169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406813
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. AUTEN, DEAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 ALTAMA AVE
 City BRUNSWICK State GA Zip Code 31525-0518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396870
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AUTEN, DEAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 ALTAMA AVE
 City BRUNSWICK State GA Zip Code 31525-0518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396871
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AUTEN, DEAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 ALTAMA AVE
 City BRUNSWICK State GA Zip Code 31525-0518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411935
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. AUTH, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14915 CELLE WAY
 City NAPLES State FL Zip Code 34110-2755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.396014
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. AUTREY, SAMUEL, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 PASEO PLACE
 City FULLERTON State CA Zip Code 92835-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408459
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AVANTS, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 WILLOW RIDGE
 City ATHENS State GA Zip Code 30606-7621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389801
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. AVERY, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1386 W STRAFORD AVE
 City GILBERT State AZ Zip Code 85233-4610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTERA CAPTIVE INSURANCE MGMT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408920
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349491
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 167 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355630
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380770
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.408028
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 168 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408111
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20220 INLAND LANE
 City MALIBU State CA Zip Code 90265-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408112
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. AVERY, RONNY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9469 WATERFORD OAKS DRIVE
 City WINTER HAVEN State FL Zip Code 33884-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE EXPRESS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016
Transaction ID : SA11A.345221
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

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

1200.00

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

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

FOR LINE NUMBER: PAGE 169 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AVERY, RONNY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9469 WATERFORD OAKS DRIVE
 City WINTER HAVEN State FL Zip Code 33884-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE EXPRESS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392506
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377945
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. AZAD, HARDAM, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 CARNAVON DRIVE
 City HOUSTON State TX Zip Code 77024-7002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AZAD COMMERCIAL REALTY SERVICES Occupation (for Individual) COMMERCIAL REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376433
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BABBITT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8000 S JAMESTOWN AVENUE
 City TULSA State OK Zip Code 74136-8047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.396582
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. BABCOCK, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City ELM CREEK State NE Zip Code 68836-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387385
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BABCOCK, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City ELM CREEK State NE Zip Code 68836-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394278
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. BABCOCK, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City ELM CREEK State NE Zip Code 68836-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394287
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BABCOCK, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City ELM CREEK State NE Zip Code 68836-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418244
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BABCOCK, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 495
 City ELM CREEK State NE Zip Code 68836-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418260
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BABLER, LLOYD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3740 SW SHATTUCK ROAD

City PORTLAND	State OR	Zip Code 97221-3008
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411788

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 3740 S.W. SHATTUCK ROAD

City PORTLAND	State OR	Zip Code 97221-3008
------------------	-------------	------------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348145

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 9001 E SUMMERFIELD STREET

City WICHITA	State KS	Zip Code 67206-3320
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MCTAI FINISHING CO	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379369

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 173 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BABST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9001 E SUMMERFIELD STREET
 City WICHITA State KS Zip Code 67206-3320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCTAI FINISHING CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379393
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. BABST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9001 E SUMMERFIELD STREET
 City WICHITA State KS Zip Code 67206-3320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCTAI FINISHING CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389390
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. BACHELOR, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2375 192ND RD.
 City SABETHA State KS Zip Code 66534-9482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BACHELOR CONTROLS, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352806
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BACHMAN, FERNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 N MAIN STREET
 City WASHINGTON State IL Zip Code 61571-1389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MESSAGE THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395839
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BACHMANN, H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BARLEY FIELD COURT
 City DICKERSON State MD Zip Code 20842-8806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397026
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BACHOFNER, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 93
 City ROUND TOP State TX Zip Code 78954-0093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411661
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

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(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BACHSCHMIDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1396
 City INGLIS State FL Zip Code 34449-1396
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAB Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362394
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BACIGALUPI, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4151 WESTSIDE ROAD
 City HEALDSBURG State CA Zip Code 95448-9357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369268
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BACON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4557 N 150 W
 City PROVO State UT Zip Code 84604-5512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOOG Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397876
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BACON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4557 N 150 W
 City PROVO State UT Zip Code 84604-5512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOOG Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 24 / 2016
Transaction ID : SA11A.408923
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. BACON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4557 N 150 W
 City PROVO State UT Zip Code 84604-5512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOOG Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 24 / 2016
Transaction ID : SA11A.408924
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. BADER, VALMA, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 ORCHARD COURT
 City SAINT LOUIS State MI Zip Code 48880-9705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BADER & SOUS CO Occupation (for Individual) TREASURER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381334
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 177 OF 5722
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BADER, VALMA, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 ORCHARD COURT
 City SAINT LOUIS State MI Zip Code 48880-9705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BADER & SOUS CO Occupation (for Individual) TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407097
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BADGER, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 GREEN BAY RD., 1C
 City WINNETKA State IL Zip Code 60093-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386438
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAER, LAWRENCE, J., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5540 CHAUNCEY DR NE
 City BELMONT State MI Zip Code 49306-9198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.345800
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 178 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAERG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5824 NAGLE AVENUE
 City VAN NUYS State CA Zip Code 91401-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352597
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BAERG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5824 NAGLE AVENUE
 City VAN NUYS State CA Zip Code 91401-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387953
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAERG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5824 NAGLE AVENUE
 City VAN NUYS State CA Zip Code 91401-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417536
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359251
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366748
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366749
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374848
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381811
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396809
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.397597
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 09 / 26 / 2016
Transaction ID : SA11A.407862
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BAGGETT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 MESA RIDGE LN.
 City AUSTIN State TX Zip Code 78735-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 09 / 26 / 2016
Transaction ID : SA11A.407866
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 182 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349089
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.353959
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368916
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368920
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.369079
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 09 / 16 / 2016
Transaction ID : SA11A.398661
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398737
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405262
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405264
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

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

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

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BAILEY, ARTHUR, E., ,

Mailing Address 3232 NW GREENBRIAR

City PORTLAND State OR Zip Code 97210-2715

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2016

Transaction ID : SA11A.353339

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BAILEY, ARTHUR, E., ,

Mailing Address 3232 NW GREENBRIAR

City PORTLAND State OR Zip Code 97210-2715

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11A.420244

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 3232 NW GREENBRIAR

City PORTLAND State OR Zip Code 97210-2715

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11A.420245

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

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

FOR LINE NUMBER: PAGE 186 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, C., F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2850 SHOOK HILL CIRCLE
 City MOUNTAIN BRK State AL Zip Code 35223-2600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379629
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BAILEY, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2437 ONYX RD
 City YORK State PA Zip Code 17408-4470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANTAGE CONSULTING Occupation (for Individual) AUDITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352102
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BAILEY, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 SUNRISE CIRCLE
 City BOULDER CITY State NV Zip Code 89005-4211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392588
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 187 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAILEY, MARYLOU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 S. OREGON AVE.
 City TAMPA State FL Zip Code 33606-3010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411157
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BAILEY, PAMELA, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 I ST NW, STE 300
 City WASHINGTON State DC Zip Code 20005-3377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GROCERY MANUFACTURERS ASSOC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.353024
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. BAILEY, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 BRIDGEWATER ROAD
 City FARMINGTON State CT Zip Code 06032-2269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406704
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 18311 NAPA STREET

City NORTHRIDGE	State CA	Zip Code 91325-3617
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) SALES EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348954

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 18311 NAPA STREET

City NORTHRIDGE	State CA	Zip Code 91325-3617
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) SALES EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412500

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BAINES, KEVIN, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2275 HUNTINGTON DRIVE #219
219

City SAN MARINO	State CA	Zip Code 91108-2640
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CALTECH	Occupation (for Individual) RESEARCH SCIENTIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.363173

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAINES, KEVIN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2275 HUNTINGTON DRIVE #219
 219
 City SAN MARINO State CA Zip Code 91108-2640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALTECH Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369262
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BAINES, KEVIN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2275 HUNTINGTON DRIVE #219
 219
 City SAN MARINO State CA Zip Code 91108-2640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALTECH Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369401
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAINES, KEVIN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2275 HUNTINGTON DRIVE #219
 219
 City SAN MARINO State CA Zip Code 91108-2640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALTECH Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390823
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BAIONI, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 999 SHADY GROVE RD. SOUTH ,STE 103
 City MEMPHIS State TN Zip Code 38120-4127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352196
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BAIRD, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 WILTSHIRE AVE
 City SAN ANTONIO State TX Zip Code 78209-6048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAIRDLAW, PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378699
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BAISH, RICHARD, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 LA ESTANCIA CIRCLE
 City EL PASO State TX Zip Code 79932-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365403
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

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

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

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

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAISH, RICHARD, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 LA ESTANCIA CIRCLE
 City EL PASO State TX Zip Code 79932-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392661
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BAISH, RICHARD, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 LA ESTANCIA CIRCLE
 City EL PASO State TX Zip Code 79932-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406597
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BAJUS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 819 PARKES RUN LANE
 City VILLANOVA State PA Zip Code 19085-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358748
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4224 HUBBELL AVENUE

City DES MOINES	State IA	Zip Code 50317-4527
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAKER GROUP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392585

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BAKER, BRADFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 270 RIVER BROOK DRIVE

City ROCHESTER	State VT	Zip Code 05767-4406
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381860

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BAKER, BRADFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 270 RIVER BROOK DRIVE

City ROCHESTER	State VT	Zip Code 05767-4406
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381861

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 193 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 RIVER BROOK DRIVE
 City ROCHESTER State VT Zip Code 05767-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422050
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BAKER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 RIVER BROOK DRIVE
 City ROCHESTER State VT Zip Code 05767-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422052
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. BAKER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 RIVER BROOK DRIVE
 City ROCHESTER State VT Zip Code 05767-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422057
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, BRUCE, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 SUNSET RIDGE RD.
 City NORTHFIELD State IL Zip Code 60093-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354119
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAKER, BRUCE, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 SUNSET RIDGE RD.
 City NORTHFIELD State IL Zip Code 60093-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413894
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAKER, BRUCE, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 SUNSET RIDGE RD.
 City NORTHFIELD State IL Zip Code 60093-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413904
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BAKER, EDWARD, , ,		Date of Receipt MM / DD / YYYY 09 / 13 / 2016
Mailing Address 1589 ROSEWOOD DRIVE		Transaction ID : SA11A.394756
City HEALDSBURG	State CA	Zip Code 95448-3257
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BAKER, FREDDIE, D., MR.,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 120 LAKE ALUMA DRIVE		Transaction ID : SA11A.401730
City OKLAHOMA CITY	State OK	Zip Code 73121-3402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) YUKON DOOR & PLYWOOD INC.	Occupation (for Individual) PRESIDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BAKER, GEORGE, , ,		Date of Receipt MM / DD / YYYY 07 / 27 / 2016
Mailing Address 921 RIPLEY LANE		Transaction ID : SA11A.356335
City OYSTER BAY	State NY	Zip Code 11771-4605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 935.00	

SUBTOTAL of Receipts This Page (optional).....▶	1610.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 921 RIPLEY LANE

City OYSTER BAY	State NY	Zip Code 11771-4605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368278

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BAKER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 921 RIPLEY LANE

City OYSTER BAY	State NY	Zip Code 11771-4605
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.383080

Amount of Each Receipt this Period
110.00

Memo Item CONTRIBUTION

C. BAKER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 921 RIPLEY LANE

City OYSTER BAY	State NY	Zip Code 11771-4605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387937

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 RIPLEY LANE
 City OYSTER BAY State NY Zip Code 11771-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387938
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAKER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 RIPLEY LANE
 City OYSTER BAY State NY Zip Code 11771-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403939
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAKER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 RIPLEY LANE
 City OYSTER BAY State NY Zip Code 11771-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS JONES & ASSOCIATES Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411251
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3160 LUNAR RD.
 City CARROLLTON State OH Zip Code 44615-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FUSION CERAMICS, INC Occupation (for Individual) VP MANUFACTURING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403497
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BAKER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10179 SE TERRA LINDA CT
 City HAPPY VALLEY State OR Zip Code 97086-6888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER BEARING CO. Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349341
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAKER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10179 SE TERRA LINDA CT
 City HAPPY VALLEY State OR Zip Code 97086-6888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER BEARING CO. Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374665
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10179 SE TERRA LINDA CT
 City HAPPY VALLEY State OR Zip Code 97086-6888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER BEARING CO. Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399732
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS STREET NE APT 333
 City ALBUQUERQUE State NM Zip Code 87111-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347522
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS STREET NE APT 333
 City ALBUQUERQUE State NM Zip Code 87111-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350745
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS STREET NE
 APT 333
 City ALBUQUERQUE State NM Zip Code 87111-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.356412
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS STREET NE
 APT 333
 City ALBUQUERQUE State NM Zip Code 87111-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS STREET NE
 APT 333
 City ALBUQUERQUE State NM Zip Code 87111-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368718
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER BROWN, OLIVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4440 MORRIS STREET NE
 APT 333
 City ALBUQUERQUE State NM Zip Code 87111-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384462
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BAKER, PAUL, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3568 SAUNDERS SETTLEMENT RD
 City SANBORN State NY Zip Code 14132-9229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXECUTIVE DIRECTOR Occupation (for Individual) NYS HORTICULTURE SOCIETY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.375448
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BAKER, JR., PHILLIPS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 N MINERAL DR STE 200
 City COEUR D ALENE State ID Zip Code 83815-9408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESIDENT Occupation (for Individual) HECLA MINING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400482
 Amount of Each Receipt this Period 4500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKER, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4615 BLARNEY DRIVE

City CEDAR RAPIDS	State IA	Zip Code 52411-8015
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.377132

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BAKKER, LENNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10478 MORGAN BLVD

City CEDAR HILLS	State UT	Zip Code 84062-8823
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIGHAM YOUNG UNIVERSITY	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2016

Transaction ID : SA11A.349018

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BAKKER, LENNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10478 MORGAN BLVD

City CEDAR HILLS	State UT	Zip Code 84062-8823
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIGHAM YOUNG UNIVERSITY	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.370537

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAKKER, LENNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10478 MORGAN BLVD

City CEDAR HILLS State UT Zip Code 84062-8823

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIGHAM YOUNG UNIVERSITY Occupation (for Individual) PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400165

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. BAKWIN, E, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 0433 W. U.S. HIGHWAY 20

City LA PORTE State IN Zip Code 46350-8609

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394444

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. BALASCHAK, JAMES, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7800 LAKE DAWN DRIVE

City WINTER PARK State FL Zip Code 32792-9012

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389430

Amount of Each Receipt this Period 400.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1425.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 204 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALCH, MANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 919 HOMESTAKE DRIVE

City GOLDEN	State CO	Zip Code 80401-1715
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.373692

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BALDWIN, ALFRED, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 CORPORATE PLAZA DR.

City NEWPORT BEACH	State CA	Zip Code 92660-7901
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BALDWIN & SONS	Occupation (for Individual) BUILDER/DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.373411

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. BALDWIN, DEEANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 CORPORATE PLAZA DR.

City NEWPORT BEACH	State CA	Zip Code 92660-7901
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.373412

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALDWIN, EDWIN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 DROMARA ROAD
 City SAINT LOUIS State MO Zip Code 63124-1816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.351890
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BALDWIN, EDWIN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 DROMARA ROAD
 City SAINT LOUIS State MO Zip Code 63124-1816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389810
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BALDWIN, H. FURLONG, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 547
 City CHERITON State VA Zip Code 23316-0547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364310
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALDWIN, KAREN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1770 S BLUEMOUND DR

City APPLETON	State WI	Zip Code 54914-4141
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLDWELL BANKER THE REAL ESTATE GROUP	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349215

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BALDWIN, KAREN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1770 S BLUEMOUND DR

City APPLETON	State WI	Zip Code 54914-4141
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLDWELL BANKER THE REAL ESTATE GROUP	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357283

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BALDWIN, KAREN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1770 S BLUEMOUND DR

City APPLETON	State WI	Zip Code 54914-4141
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLDWELL BANKER THE REAL ESTATE GROUP	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404584

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 207 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALDWIN, KAREN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1770 S BLUEMOUND DR

City APPLETON	State WI	Zip Code 54914-4141
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLDWELL BANKER THE REAL ESTATE GROUP	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412442

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BALENTINE, JIMMIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20839 NIGHTWATCH ROAD

City STURGIS	State SD	Zip Code 57785-7100
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CUBIC CORPORATION	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2016

Transaction ID : SA11A.346600

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BALISTRERI, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3926 WEST GAZEBO HILL PKWY

City MEQUON	State WI	Zip Code 53092-5184
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403639

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALISTRERI, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3926 WEST GAZEBO HILL PKWY
 City MEQUON State WI Zip Code 53092-5184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403691
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BALKAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2504 AUDUBON TRACE
 City JEFFERSON State LA Zip Code 70121-1583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362342
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. BALKAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2504 AUDUBON TRACE
 City JEFFERSON State LA Zip Code 70121-1583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BALKAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2504 AUDUBON TRACE
 City JEFFERSON State LA Zip Code 70121-1583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410800
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BALLANTYNE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 FIR STREET
 City NEW LENOX State IL Zip Code 60451-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BALLANTYNE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 FIR STREET
 City NEW LENOX State IL Zip Code 60451-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414382
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BALSER, KATHLEEN, , ,

Mailing Address 423 S MILLER ST
 P.O. BOX 1072

City ROCKAWAY BEACH State OR Zip Code 97136-9910

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : SA11A.348527

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BALSER, KATHLEEN, , ,

Mailing Address 423 S MILLER ST
 P.O. BOX 1072

City ROCKAWAY BEACH State OR Zip Code 97136-9910

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.404929

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BALSER, KATHLEEN, , ,

Mailing Address 423 S MILLER ST
 P.O. BOX 1072

City ROCKAWAY BEACH State OR Zip Code 97136-9910

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.404940

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 211 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BANCROFT, J. GAIL, , ,
 Mailing Address 7010 ARMAT DRIVE
 City BETHESDA State MD Zip Code 20817-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354787
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BANCROFT, J. GAIL, , ,
 Mailing Address 7010 ARMAT DRIVE
 City BETHESDA State MD Zip Code 20817-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354788
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BANCROFT, J. GAIL, , ,
 Mailing Address 7010 ARMAT DRIVE
 City BETHESDA State MD Zip Code 20817-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422207
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BANE, ARLO, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 N WEST STREET

City LE ROY	State IL	Zip Code 61752-1176
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11A.366080

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. BANEY, RICHARD, N., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 LANDSING DR

City SATELLITE BEACH	State FL	Zip Code 32937-
-------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11A.377645

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BANEY, RICHARD, N., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 LANDSING DR

City SATELLITE BEACH	State FL	Zip Code 32937-
-------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11A.379377

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352312
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.377481
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382383
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393988
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BANKS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 BRIDLE DR
 City HENDERSON State NV Zip Code 89002-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401433
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. BANNING, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 SO. EAGLES PT.
 City ORANGE State CA Zip Code 92869-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399276
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	295.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARAGLIA, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 GREENFIELD DRIVE

City NEW BRITAIN	State CT	Zip Code 06051-1624
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.377694

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BARBER, H., R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 321 W MENOMONEE ST

City CHICAGO	State IL	Zip Code 60614-5341
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JMB REALTY CORP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.369615

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

C. BARBER, H., R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 321 W MENOMONEE ST

City CHICAGO	State IL	Zip Code 60614-5341
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JMB REALTY CORP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.401737

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAREFOOT, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 ROCKFALL COURT
 City RALEIGH State NC Zip Code 27614-8208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365702
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BAREFOOT, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 ROCKFALL COURT
 City RALEIGH State NC Zip Code 27614-8208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391731
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARES, KEITH, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 INDIAN MOUND ST. #1A
 City WAYZATA State MN Zip Code 55391-3700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CC MANAGEMENT, LLC Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392113
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARFIELD, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1208
 City CLEVELAND State MS Zip Code 38732-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387757
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BARFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3324 SENASAC AVE.
 City LONG BEACH State CA Zip Code 90808-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382214
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3324 SENASAC AVE.
 City LONG BEACH State CA Zip Code 90808-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382215
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3324 SENASAC AVE.
 City LONG BEACH State CA Zip Code 90808-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403900
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BARFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3324 SENASAC AVE.
 City LONG BEACH State CA Zip Code 90808-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403927
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BARFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3324 SENASAC AVE.
 City LONG BEACH State CA Zip Code 90808-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413343
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3324 SENASAC AVE.
 City LONG BEACH State CA Zip Code 90808-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416142
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BARFKNECHT, HAROLD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6734 TRIPLE T RD
 City MOUNT CALVARY State WI Zip Code 53057-9615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344533
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. BARFKNECHT, HAROLD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6734 TRIPLE T RD
 City MOUNT CALVARY State WI Zip Code 53057-9615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418760
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	134.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARINEAU, JOHN, , MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 BERING DR. STE. 410

City HOUSTON	State TX	Zip Code 77057-2131
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RADNEY MANAGEMENT & INVESTMENTS	Occupation (for Individual) PROPERTY MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.363246

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. BARINEAU, JOHN, , MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 BERING DR. STE. 410

City HOUSTON	State TX	Zip Code 77057-2131
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RADNEY MANAGEMENT & INVESTMENTS	Occupation (for Individual) PROPERTY MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413235

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BARKER, CHARLOTTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35940 HWY 19

City KIMBERLY	State OR	Zip Code 97848-6216
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) GEOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353803

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 OF 5722 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARKER, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35940 HWY 19
 City KIMBERLY State OR Zip Code 97848-6216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375769
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BARKER, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35940 HWY 19
 City KIMBERLY State OR Zip Code 97848-6216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404238
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARKER, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35940 HWY 19
 City KIMBERLY State OR Zip Code 97848-6216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422688
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARLOW, H, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8006 AVALON PL

City MERCER ISLAND	State WA	Zip Code 98040-5650
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11A.358053

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

B. BARNA, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 HEATHER COURT

City PALM DESERT	State CA	Zip Code 92260-6748
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
927.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2016

Transaction ID : SA11A.352510

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BARNA, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 HEATHER COURT

City PALM DESERT	State CA	Zip Code 92260-6748
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
927.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2016

Transaction ID : SA11A.364115

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260-6748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 927.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386672
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BARNA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260-6748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 927.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399316
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BARNA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 HEATHER COURT
 City PALM DESERT State CA Zip Code 92260-6748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 927.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399317
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNA, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 HEATHER COURT

City PALM DESERT	State CA	Zip Code 92260-6748
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
927.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401250

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BARNA, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 HEATHER COURT

City PALM DESERT	State CA	Zip Code 92260-6748
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
927.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416772

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BARNES, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 618 TORTOISE WAY

City SATELLITE BEACH	State FL	Zip Code 32937-3830
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HARRIS CORPORATION	Occupation (for Individual) SYSTEMS ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374398

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 618 TORTOISE WAY

City SATELLITE BEACH	State FL	Zip Code 32937-3830
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HARRIS CORPORATION	Occupation (for Individual) SYSTEMS ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399231

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BARNES, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 618 TORTOISE WAY

City SATELLITE BEACH	State FL	Zip Code 32937-3830
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HARRIS CORPORATION	Occupation (for Individual) SYSTEMS ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399232

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BARNES, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 618 TORTOISE WAY

City SATELLITE BEACH	State FL	Zip Code 32937-3830
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HARRIS CORPORATION	Occupation (for Individual) SYSTEMS ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422907

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNETT, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 FAIRWAY LANE
 City LOUISVILLE State KY Zip Code 40207-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALGOOD FOOD COMPANY Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411701
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BARNES, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 SKYBIRD COURT
 City LAS VEGAS State NV Zip Code 89135-7865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397273
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BARNES, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 ASTI CT
 City NORTH VENICE State FL Zip Code 34275-6705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385916
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 ASTI CT
 City NORTH VENICE State FL Zip Code 34275-6705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396785
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARNES, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 ASTI CT
 City NORTH VENICE State FL Zip Code 34275-6705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BARNES, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 ASTI CT
 City NORTH VENICE State FL Zip Code 34275-6705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403532
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 228 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 ASTI CT

City NORTH VENICE State FL Zip Code 34275-6705

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.403534

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BARNETT, SHIRLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12710 FOXBURO DR

City HOUSTON State TX Zip Code 77065-3304

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : SA11A.352315

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BARNETT, SHIRLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12710 FOXBURO DR

City HOUSTON State TX Zip Code 77065-3304

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11A.368214

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNETT, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 FOXBURO DR
 City HOUSTON State TX Zip Code 77065-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372122
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BARNETT, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 FOXBURO DR
 City HOUSTON State TX Zip Code 77065-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372123
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARNETT, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 FOXBURO DR
 City HOUSTON State TX Zip Code 77065-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 08 / 21 / 2016
Transaction ID : SA11A.377482
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 230 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNETT, SHIRLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12710 FOXBURD DR

City HOUSTON	State TX	Zip Code 77065-3304
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384054

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BARNETT, SHIRLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12710 FOXBURD DR

City HOUSTON	State TX	Zip Code 77065-3304
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401458

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BARNES, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4700 PACER WAY

City FLOWER MOUND	State TX	Zip Code 75028-8766
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344529

Amount of Each Receipt this Period
147.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	197.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNES, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4700 PACER WAY
City FLOWER MOUND State TX Zip Code 75028-8766
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 297.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380597
Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. BARNETT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address MARKET BRIDGE LANE 302
City RALEIGH State NC Zip Code 27608-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BP LLC Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356337
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BARNETT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address MARKET BRIDGE LANE 302
City RALEIGH State NC Zip Code 27608-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BP LLC Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362354
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 232 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNETT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address MARKET BRIDGE LANE
 302
 City RALEIGH State NC Zip Code 27608-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BP LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383050
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BARNETT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address MARKET BRIDGE LANE
 302
 City RALEIGH State NC Zip Code 27608-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BP LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411312
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BARRETT, IRAL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 LOWER LAVISTA CT. NW
 City SALEM State OR Zip Code 97304-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2016
Transaction ID : SA11A.346555
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARRETT, IRAL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 LOWER LAVISTA CT. NW
 City SALEM State OR Zip Code 97304-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 10 / 2016
Transaction ID : SA11A.364135
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. BARRETT, IRAL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 LOWER LAVISTA CT. NW
 City SALEM State OR Zip Code 97304-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383627
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. BARRETT, IRAL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 LOWER LAVISTA CT. NW
 City SALEM State OR Zip Code 97304-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 10 / 2016
Transaction ID : SA11A.393774
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARRETT, IRAL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 LOWER LAVISTA CT. NW
 City SALEM State OR Zip Code 97304-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416875
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BARRETT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 GRAY TERRACE
 City BRAintree State MA Zip Code 02184-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CES LLC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355783
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BARRETT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 GRAY TERRACE
 City BRAintree State MA Zip Code 02184-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CES LLC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380731
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARRETT, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 GRAY TERRACE

City BRAintree	State MA	Zip Code 02184-8253
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CES LLC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407995

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BARRETT, WILLIAM, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 PINCKNEY LANDING DRIVE

City SHELDON	State SC	Zip Code 29941-3051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Transaction ID : SA11A.360057

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. BARRETT, WILLIAM, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 PINCKNEY LANDING DRIVE

City SHELDON	State SC	Zip Code 29941-3051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394749

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 236 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARRIER, PATRICIA, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1813 91ST PL NE
 City CLYDE HILL State WA Zip Code 98004-3202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360324
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. BARRICK, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15907 BOOTH CIRCLE
 City VOLENTE State TX Zip Code 78641-9679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICH BARRICK Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365089
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BARRICK, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15907 BOOTH CIRCLE
 City VOLENTE State TX Zip Code 78641-9679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICH BARRICK Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366864
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARRICK, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15907 BOOTH CIRCLE
 City VOLENTE State TX Zip Code 78641-9679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICH BARRICK Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394561
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARROWS, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12034 TOPAZ ST
 City CLERMONT State FL Zip Code 34711-8876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359637
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BARROIS, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N. STERLING ST
 City LAFAYETTE State LA Zip Code 70501-4945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt **07 / 02 / 2016**
Transaction ID : SA11A.344283
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 431.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 238 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BARROIS, BRENDA, , ,		Date of Receipt MM / DD / YYYY 09 / 27 / 2016 Transaction ID : SA11A.413830
Mailing Address 411 N. STERLING ST		Amount of Each Receipt this Period 100.00
City LAFAYETTE	State LA	Zip Code 70501-4945
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BARRY, WALTER, R., MR., JR.		Date of Receipt MM / DD / YYYY 07 / 21 / 2016 Transaction ID : SA11A.354043
Mailing Address 2960 GALE ROAD		Amount of Each Receipt this Period 500.00
City WAYZATA	State MN	Zip Code 55391-2626
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BARRY, WALTER, R., MR., JR.		Date of Receipt MM / DD / YYYY 08 / 21 / 2016 Transaction ID : SA11A.377477
Mailing Address 2960 GALE ROAD		Amount of Each Receipt this Period 500.00
City WAYZATA	State MN	Zip Code 55391-2626
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTELL, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 MEADOWSWEET DRIVE
 City STATE COLLEGE State PA Zip Code 16801-7299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARTELL AND BARTELL LTD Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392606
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BARTHOLOMAY, ALICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 35TH AVE. S 136
 City MINNEAPOLIS State MN Zip Code 55417-1556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359598
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARTHOLOMAY, ALICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 35TH AVE. S 136
 City MINNEAPOLIS State MN Zip Code 55417-1556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.364162
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTHOLOMAY, ALICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 35TH AVE. S
 136
 City MINNEAPOLIS State MN Zip Code 55417-1556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368079
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BARTHOLOMAY, ALICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 35TH AVE. S
 136
 City MINNEAPOLIS State MN Zip Code 55417-1556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389008
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. BARTHOLOMAY, ALICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 35TH AVE. S
 136
 City MINNEAPOLIS State MN Zip Code 55417-1556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394418
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 85.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTHOLOMAY, ALICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 35TH AVE. S
 136
 City MINNEAPOLIS State MN Zip Code 55417-1556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARTHOLOMAY, ALICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 35TH AVE. S
 136
 City MINNEAPOLIS State MN Zip Code 55417-1556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418115
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARTHOLMAI, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N7229 HICKORY SPRING RD.
 City BEAVER DAM State WI Zip Code 53916-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347346
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTHOLMAI, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N7229 HICKORY SPRING RD.
 City BEAVER DAM State WI Zip Code 53916-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352191
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BARTHOLMAI, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N7229 HICKORY SPRING RD.
 City BEAVER DAM State WI Zip Code 53916-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357317
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARTHOLMAI, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N7229 HICKORY SPRING RD.
 City BEAVER DAM State WI Zip Code 53916-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357318
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTHOLMAI, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N7229 HICKORY SPRING RD.
 City BEAVER DAM State WI Zip Code 53916-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368721
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARTHOLMAI, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N7229 HICKORY SPRING RD.
 City BEAVER DAM State WI Zip Code 53916-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARTHOLOMEW, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 TIDE WATCH
 City NEWPORT COAST State CA Zip Code 92657-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINDJAMMER CAPITAL Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.356683
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 244 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTKOWSKI, RICHARD, , DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 408 ROGERS LANE

City WALLINGFORD	State PA	Zip Code 19086-6029
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) T.S.U.	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397277

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BARTLEY, LOREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 832 HOLBROOK CIRCLE

City FORT WALTON BEACH	State FL	Zip Code 32547-6731
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357502

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BARTLEY, LOREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 832 HOLBROOK CIRCLE

City FORT WALTON BEACH	State FL	Zip Code 32547-6731
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382801

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 245 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTLEY, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 832 HOLBROOK CIRCLE
 City FORT WALTON BEACH State FL Zip Code 32547-6731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413026
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARTLETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1945 MAPLE PLACE
 City RIVERWOODS State IL Zip Code 60015-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378462
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BARTLETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1945 MAPLE PLACE
 City RIVERWOODS State IL Zip Code 60015-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389328
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTLETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1945 MAPLE PLACE
 City RIVERWOODS State IL Zip Code 60015-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390127
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BARTLETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1945 MAPLE PLACE
 City RIVERWOODS State IL Zip Code 60015-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390135
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BARTLETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1945 MAPLE PLACE
 City RIVERWOODS State IL Zip Code 60015-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390136
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 247 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTLETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1945 MAPLE PLACE
 City RIVERWOODS State IL Zip Code 60015-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413309
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355749
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380725
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTLETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 US ROUTE 9
 City ELIZABETHTOWN State NY Zip Code 12932-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407966
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BARTMESS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 158 PARK PLACE DR. 227 B
 City WADSWORTH State OH Zip Code 44281-8718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357188
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARTMESS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 158 PARK PLACE DR. 227 B
 City WADSWORTH State OH Zip Code 44281-8718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt 08 / 06 / 2016
Transaction ID : SA11A.363339
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 249 OF 5722
(x) 11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BARTMESS, ROBERT, , ,
Mailing Address 158 PARK PLACE DR.
227 B
City WADSWORTH State OH Zip Code 44281-8718
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 407.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.370404
Amount of Each Receipt this Period
100.00
Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BARTMESS, ROBERT, , ,
Mailing Address 158 PARK PLACE DR.
227 B
City WADSWORTH State OH Zip Code 44281-8718
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 407.00

Date of Receipt
08 / 24 / 2016
Transaction ID : SA11A.378746
Amount of Each Receipt this Period
50.00
Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BARTMESS, ROBERT, , ,
Mailing Address 158 PARK PLACE DR.
227 B
City WADSWORTH State OH Zip Code 44281-8718
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 407.00

Date of Receipt
09 / 10 / 2016
Transaction ID : SA11A.393758
Amount of Each Receipt this Period
50.00
Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 200.00
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 5722
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTMESS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 158 PARK PLACE DR.
 227 B
 City WADSWORTH State OH Zip Code 44281-8718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402710
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BARTON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 ALDEN ST.
 City PLYMOUTH State MA Zip Code 02360-4556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387822
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BARTON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 ALDEN ST.
 City PLYMOUTH State MA Zip Code 02360-4556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416795
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 ALDEN ST.
 City PLYMOUTH State MA Zip Code 02360-4556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416802
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BARTON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 ALDEN ST.
 City PLYMOUTH State MA Zip Code 02360-4556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416803
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BARTON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 ALDEN ST.
 City PLYMOUTH State MA Zip Code 02360-4556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416805
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8995
 City KODIAK State AK Zip Code 99615-8995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353673
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BARTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8995
 City KODIAK State AK Zip Code 99615-8995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.363110
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BARTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8995
 City KODIAK State AK Zip Code 99615-8995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378693
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 253 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8995
 City KODIAK State AK Zip Code 99615-8995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382292
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BARTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8995
 City KODIAK State AK Zip Code 99615-8995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410696
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BARTON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2828 HOOD ST., 1403
 City DALLAS State TX Zip Code 75219-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.411237
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASILE, ROBERT, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City LINO LAKES State MN Zip Code 55014-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417998
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BASILE, ROBERT, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WOODRIDGE COURT
 City LINO LAKES State MN Zip Code 55014-5442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418000
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BASKIN, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 YALE AVE
 City KENSINGTON State CA Zip Code 94708-1048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372918
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASOLA, BART, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 BUCKMINSTER CT.
 City LAKE BLUFF State IL Zip Code 60044-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374285
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BASS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17606 N 134TH AVE
 City SUN CITY WEST State AZ Zip Code 85375-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.385016
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BASS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17606 N 134TH AVE
 City SUN CITY WEST State AZ Zip Code 85375-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 24 / 2016
Transaction ID : SA11A.408762
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 256 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17606 N 134TH AVE
 City SUN CITY WEST State AZ Zip Code 85375-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408763
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. BASS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17606 N 134TH AVE
 City SUN CITY WEST State AZ Zip Code 85375-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416115
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. BASS, LEE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 MAIN STREET SUITE 2700
 City FORT WORTH State TX Zip Code 76102-3131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LMBI LP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 60600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.407205
 Amount of Each Receipt this Period
 55200.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASS, RAMONA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 MAIN STREET
 SUITE 2700
 City FORT WORTH State TX Zip Code 76102-3131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LMBI LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 55200.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.407204
 Amount of Each Receipt this Period 55200.00
 Memo Item CONTRIBUTION

B. BASS-DERSCHIED, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 E CACTUS RD.
 UNIT 65
 City SCOTTSDALE State AZ Zip Code 85259-2507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXCEL VISION Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405082
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BASSO, PETER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3638 CAMDEN COURT
 City AUBURN HILLS State MI Zip Code 48326-1888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETER BASSO ASSOCIATES, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357378
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	55550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASSO, PETER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3638 CAMDEN COURT
 City AUBURN HILLS State MI Zip Code 48326-1888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETER BASSO ASSOCIATES, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357379
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BASSO, PETER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3638 CAMDEN COURT
 City AUBURN HILLS State MI Zip Code 48326-1888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETER BASSO ASSOCIATES, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358371
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BASSO, PETER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3638 CAMDEN COURT
 City AUBURN HILLS State MI Zip Code 48326-1888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETER BASSO ASSOCIATES, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368554
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 259 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASSO, PETER, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3638 CAMDEN COURT
 City AUBURN HILLS State MI Zip Code 48326-1888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETER BASSO ASSOCIATES, INC. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410090
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BATEMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 N 850 E
 City BOUNTIFUL State UT Zip Code 84010-2665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355755
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BATEMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 N 850 E
 City BOUNTIFUL State UT Zip Code 84010-2665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380726
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATEMAN, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 N 850 E
 City BOUNTIFUL State UT Zip Code 84010-2665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407993
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BATES, EARLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 KENDAL DRIVE APT 410
 City LEXINGTON State VA Zip Code 24450-1786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397210
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BATES, EARLE, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 KENDAL DRIVE APT 415
 City LEXINGTON State VA Zip Code 24450-1791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.395098
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATES, EARLE, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 KENDAL DRIVE
 APT 415
 City LEXINGTON State VA Zip Code 24450-1791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417201
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BATTAGLIA, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNTON CT
 21
 City NOVATO State CA Zip Code 94945-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344501
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

C. BATTAGLIA, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNTON CT
 21
 City NOVATO State CA Zip Code 94945-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344503
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	159.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATTAGLIA, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNTON CT
 21
 City NOVATO State CA Zip Code 94945-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.376380
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BATTAGLIA, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNTON CT
 21
 City NOVATO State CA Zip Code 94945-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.387110
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BATTAGLIA, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNTON CT
 21
 City NOVATO State CA Zip Code 94945-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.422695
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATTAGLIA, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 THORNTON CT
 21
 City NOVATO State CA Zip Code 94945-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422698
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BATTLE, ROBERT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9910 LONG POINT RD
 City HOUSTON State TX Zip Code 77055-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMP HEALTH ASSN Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356164
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BATTLE, ROBERT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9910 LONG POINT RD
 City HOUSTON State TX Zip Code 77055-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMP HEALTH ASSN Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401290
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BATTLE, ROBERT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9910 LONG POINT RD
 City HOUSTON State TX Zip Code 77055-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMP HEALTH ASSN Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401291
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BATZA, MICHAEL, J., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 FAIRMOUNT AVENUE SUITE 100
 City TOWSON State MD Zip Code 21286-5484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERITAGE PROPERTIES INC Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375128
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BAUCOM, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 PRESSLEY DOWNS DRIVE, SE
 City CONCORD State NC Zip Code 28025-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.401570
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 265 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAUCOM, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 PRESSLEY DOWNS DRIVE, SE
 City CONCORD State NC Zip Code 28025-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.401574
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BAUER, WM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11120 SW 58TH COURT
 City MIAMI State FL Zip Code 33156-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377928
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BAUM, CLIFFORD, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4878 KING RICHARD RD.
 City JACKSONVILLE State FL Zip Code 32210-7515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.419986
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 266 OF 5722
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAUMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 FLAGLER PROMENADE S
 City WEST PALM BEACH State FL Zip Code 33405-2731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411741
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BAXTER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11100 SANTA MONICA BLVD STE 1200
 City LOS ANGELES State CA Zip Code 90025-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10800.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.352927
 Amount of Each Receipt this Period 10800.00
 Memo Item CONTRIBUTION

C. BAXTER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28389 CATALPA POINT ROAD
 City SALISBURY State MD Zip Code 21801-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAXTER-ENTERPRISES INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396990
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 267 OF 5722
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAYOUTH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 THAMER CIRCLE
 City HOUSTON State TX Zip Code 77024-6918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S Occupation (for Individual) A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404995
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. BDZIL, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 CAMINO REDONDO
 City LOS ALAMOS State NM Zip Code 87544-2725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOS ALAMOS LABS, EMRE Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391104
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. BEADLES, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 3457
 City MOULTRIE State GA Zip Code 31776-3457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANFOR\BEADLES OMBER Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383969
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 268 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEADLES, VICTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 3457

City MOULTRIE	State GA	Zip Code 31776-3457
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) CANFOR\BEADLES OMBER		Occupation (for Individual) MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

Date of Receipt
08 / 30 / 2016
Transaction ID : SA11A.383982

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BEAL, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6000 LEGACY DR

City PLANO	State TX	Zip Code 75024-3601
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) BEAL BANK		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
07 / 14 / 2016
Transaction ID : SA11A.346113

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. BEAL, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3245 S ATLANTIC AVE
1003

City DAYTONA BEACH SHOR	State FL	Zip Code 32118-6298
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 750.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348582

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348587
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2016
Transaction ID : SA11A.349014
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349228
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355684
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380777
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386670
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 271 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386678
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405114
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.408031
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAL, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3245 S ATLANTIC AVE
 1003
 City DAYTONA BEACH SHOR State FL Zip Code 32118-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412927
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350478
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.362011
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 273 OF 5722
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363878
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368930
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373223
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 5722
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374614
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.399026
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BEALL, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 172
 City CONCORD State NC Zip Code 28026-0172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419712
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEALL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ARROWHEAD PASS
 City WIMBERLEY State TX Zip Code 78676-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368326
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEALL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ARROWHEAD PASS
 City WIMBERLEY State TX Zip Code 78676-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390205
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. BEALL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ARROWHEAD PASS
 City WIMBERLEY State TX Zip Code 78676-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390212
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEALS, ELEANORE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23005 N 74TH STREET, UNIT 1409
UNIT 1409

City SCOTTSDALE State AZ Zip Code 85255-7509

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11A.362802

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. BEAN, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1320 DRAKE RIDGE CREST

City REDLANDS State CA Zip Code 92373-6519

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENTURY GROUP NEWSPAPERS Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016

Transaction ID : SA11A.392875

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. BEARD, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 503 FOREST CIRCLE

City TROY State AL Zip Code 36081-1626

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
MM / DD / YYYY
07 / 25 / 2016

Transaction ID : SA11A.354522

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 FOREST CIRCLE
 City TROY State AL Zip Code 36081-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.370705
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BEARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 FOREST CIRCLE
 City TROY State AL Zip Code 36081-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.380025
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. BEARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 FOREST CIRCLE
 City TROY State AL Zip Code 36081-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.408688
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEARDEN, MARY, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7277 ABERDEEN PARKWAY E
 City TULSA State OK Zip Code 74132-2139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354925
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. BEARDEN, MARY, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7277 ABERDEEN PARKWAY E
 City TULSA State OK Zip Code 74132-2139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360946
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. BEARDEN, MARY, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7277 ABERDEEN PARKWAY E
 City TULSA State OK Zip Code 74132-2139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364461
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 279 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BEARDEN, MARY, E., MRS.,		Date of Receipt MM / DD / YYYY 08 / 26 / 2016 Transaction ID : SA11A.379454
Mailing Address 7277 ABERDEEN PARKWAY E		Amount of Each Receipt this Period 35.00
City TULSA	State OK	Zip Code 74132-2139
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BEARDEN, MARY, E., MRS.,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016 Transaction ID : SA11A.407111
Mailing Address 7277 ABERDEEN PARKWAY E		Amount of Each Receipt this Period 50.00
City TULSA	State OK	Zip Code 74132-2139
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BEARD, PAUL, , ,		Date of Receipt MM / DD / YYYY 07 / 25 / 2016 Transaction ID : SA11A.354101
Mailing Address PO BOX 1564		Amount of Each Receipt this Period 200.00
City PORT ARTHUR	State TX	Zip Code 77641-1564
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEARD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1564

City PORT ARTHUR	State TX	Zip Code 77641-1564
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392997

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BEASLEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2597

City DURHAM	State NC	Zip Code 27715-2597
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358709

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BEASLEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2597

City DURHAM	State NC	Zip Code 27715-2597
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366259

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEASLEY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 2597**

City **DURHAM** State **NC** Zip Code **27715-2597**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407149

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

B. BEATON, PERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **853 VANDERBILT BEACH RD #249**

City **NAPLES** State **FL** Zip Code **34108-8746**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5001.00**

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366860

Amount of Each Receipt this Period **5001.00**

Memo Item CONTRIBUTION

C. BEATTIE, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9330 PARK AVE**

City **BLOOMINGTON** State **MN** Zip Code **55420-3835**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MHC SOFTWARE** Occupation (for Individual) **ACCOUNTANT**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384458

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **5251.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEATTIE, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9330 PARK AVE

City BLOOMINGTON	State MN	Zip Code 55420-3835
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MHC SOFTWARE	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384474

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BEATTIE, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9330 PARK AVE

City BLOOMINGTON	State MN	Zip Code 55420-3835
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MHC SOFTWARE	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.422118

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BEATTIE, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9330 PARK AVE

City BLOOMINGTON	State MN	Zip Code 55420-3835
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MHC SOFTWARE	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.423162

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEAVER, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21525 SHOREVISTA LANE

City NOBLESVILLE	State IN	Zip Code 46062-6793
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN HEALTH NETWORK	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.401622

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. BECHTOL, CARTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 811 CHWOWNING RD

City HOUSTON	State TX	Zip Code 77024-4512
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MORGAN GROUP	Occupation (for Individual) REAL ESTATE DEVELOPMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.411725

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BECHT, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7608 37TH AVENUE

City MOLINE	State IL	Zip Code 61265-8029
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN DEERE SHARED SERVICES INC.	Occupation (for Individual) ASSOCIATE GENERAL COUNSEL
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11A.389068

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BECKER, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 N. MICHIGAN AVE
SUITE 3300

City CHICAGO State IL Zip Code 60611-4250

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARETTA PARTNERS Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
09 / 29 / 2016
Transaction ID : SA11A.419973

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. BECKER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7904 COACH STREET

City POTOMAC State MD Zip Code 20854-3807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOGAN LOVELLS Occupation (for Individual) PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.402748

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BECKER, RICHARD, C., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3496 N MURRAY AVENUE

City MILWAUKEE State WI Zip Code 53211-2817

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.385220

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 35250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BECKNER, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2712 CASEY KEY ROAD
 City NOKOMIS State FL Zip Code 34275-3358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383276
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. BECKWITH, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ETNA DRIVE
 City NEWPORT NEWS State VA Zip Code 23608-2529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392643
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BECRAFT, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 LAKEVIEW DRIVE
 City HORSESHOE BAY State TX Zip Code 78657-6265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414716
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEDESCHI, SILVIO, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 SUNSET BOULEVARD

City STEUBENVILLE	State OH	Zip Code 43952-2335
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016

Transaction ID : SA11A.347699

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BEDESCHI, SILVIO, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 SUNSET BOULEVARD

City STEUBENVILLE	State OH	Zip Code 43952-2335
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : SA11A.358504

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. BEDESCHI, SILVIO, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 SUNSET BOULEVARD

City STEUBENVILLE	State OH	Zip Code 43952-2335
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11A.358531

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 287 OF 5722 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BEDESCHI, SILVIO, M., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 11 / 2016 Transaction ID : SA11A.364356		
Mailing Address 3107 SUNSET BOULEVARD			Amount of Each Receipt this Period 500.00		
City STEUBENVILLE	State OH	Zip Code 43952-2335	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 3700.00		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BEDESCHI, SILVIO, M., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 24 / 2016 Transaction ID : SA11A.377592		
Mailing Address 3107 SUNSET BOULEVARD			Amount of Each Receipt this Period 1000.00		
City STEUBENVILLE	State OH	Zip Code 43952-2335	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 3700.00		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BEDESCHI, SILVIO, M., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 25 / 2016 Transaction ID : SA11A.378600		
Mailing Address 3107 SUNSET BOULEVARD			Amount of Each Receipt this Period 500.00		
City STEUBENVILLE	State OH	Zip Code 43952-2335	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 3700.00		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEDESCHI, SILVIO, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 SUNSET BOULEVARD
 City STEUBENVILLE State OH Zip Code 43952-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3700.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400461
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BEDNAR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 GALLERIA 1802
 City EDINA State MN Zip Code 55435-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DHB HOLDINGS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349220
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEDNAR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 GALLERIA 1802
 City EDINA State MN Zip Code 55435-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DHB HOLDINGS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397741
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEDNAR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 GALLERIA
 1802
 City EDINA State MN Zip Code 55435-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DHB HOLDINGS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414340
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEDNAR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 GALLERIA
 1802
 City EDINA State MN Zip Code 55435-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DHB HOLDINGS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414342
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEDNARZ, EDWARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27761 VILLA ROAD
 City EASTON State MD Zip Code 21601-7205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345236
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 290 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEDWELL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 ALLERTON ROAD
 City WEST CHESTER State PA Zip Code 19382-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BEDWELL COMPANY Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353483
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEDWELL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 ALLERTON ROAD
 City WEST CHESTER State PA Zip Code 19382-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BEDWELL COMPANY Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382321
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEDWELL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 ALLERTON ROAD
 City WEST CHESTER State PA Zip Code 19382-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BEDWELL COMPANY Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384672
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 291 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEDWELL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 ALLERTON ROAD
 City WEST CHESTER State PA Zip Code 19382-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BEDWELL COMPANY Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384678
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BEDWELL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 ALLERTON ROAD
 City WEST CHESTER State PA Zip Code 19382-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BEDWELL COMPANY Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416101
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEECH, LORETTA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 GREENSIDE DRIVE
 City GONZALES State LA Zip Code 70737-6540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362801
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 292 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEECKEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1530 N STATE PARKWAY UNIT 9

City CHICAGO	State IL	Zip Code 60610-8619
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEECKEN PETTY O'KEEFE	Occupation (for Individual) PRIVATE EQUITY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	02	/	2016

Transaction ID : SA11A.358919

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO	State TX	Zip Code 78245-3547
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

Transaction ID : SA11A.352112

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO	State TX	Zip Code 78245-3547
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1389.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2016

Transaction ID : SA11A.354499

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2016
Transaction ID : SA11A.354563
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2016
Transaction ID : SA11A.354564
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2016
Transaction ID : SA11A.354565
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BEERS, CLAIRE, N., MS.,

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO	State TX	Zip Code 78245-3547
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.357211

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BEERS, CLAIRE, N., MS.,

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO	State TX	Zip Code 78245-3547
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.357214

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BEERS, CLAIRE, N., MS.,

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO	State TX	Zip Code 78245-3547
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359110

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 295 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359111
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.363227
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364743
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO State TX Zip Code 78245-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364744

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO State TX Zip Code 78245-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368336

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO State TX Zip Code 78245-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016

Transaction ID : SA11A.379996

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383199
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383200
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384115
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.389350
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392018
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392022
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 299 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO State TX Zip Code 78245-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
09 / 14 / 2016
Transaction ID : SA11A.396641

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO State TX Zip Code 78245-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.403246

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO State TX Zip Code 78245-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.403249

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 300 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404679
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404740
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404741
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407630
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408707
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412930
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.417550
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.417551
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BEERS, CLAIRE, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 JOHN D RYAN BOULEVARD
 APT 522
 City SAN ANTONIO State TX Zip Code 78245-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.422208
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEERS, CLAIRE, N., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 JOHN D RYAN BOULEVARD
APT 522

City SAN ANTONIO State TX Zip Code 78245-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.422228

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BEERS, ROYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2122 S LAKE LEELANAU DRIVE

City LAKE LEELANAU State MI Zip Code 49653-9453

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11A.379426

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BEGEMANN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2572 WATERCREST DR.

City CARSON CITY State NV Zip Code 89703-8434

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348509

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEGEMANN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2572 WATERCREST DR.

City CARSON CITY	State NV	Zip Code 89703-8434
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359391

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BEGEMANN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2572 WATERCREST DR.

City CARSON CITY	State NV	Zip Code 89703-8434
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372696

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BEGEMANN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2572 WATERCREST DR.

City CARSON CITY	State NV	Zip Code 89703-8434
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399939

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEHNEY, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5034 ALTA CANYADA ROAD
 City LA CANADA State CA Zip Code 91011-1735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.354852
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BEHRMANN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25422 ESTES LAKE LANE
 City KATY State TX Zip Code 77494-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.367080
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BEHRMANN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25422 ESTES LAKE LANE
 City KATY State TX Zip Code 77494-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.406823
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEINECKE, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7439 CINNAMON WOODS DRIVE

City WEST CHESTER	State OH	Zip Code 45069-1041
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 18 / 2016
Transaction ID : SA11A.371136

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. BELL, IDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3000 ANDREWS DRIVE

City ATLANTA	State GA	Zip Code 30305-2000
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 19 / 2016
Transaction ID : SA11A.397229

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. BELL, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4073 E RIVER ROAD

City CARDINAL	State VA	Zip Code 23025-2017
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.381453

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 120786
 City NEW BRIGHTON State MN Zip Code 55112-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016
Transaction ID : SA11A.348266
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BELL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 120786
 City NEW BRIGHTON State MN Zip Code 55112-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.351069
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BELL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 120786
 City NEW BRIGHTON State MN Zip Code 55112-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368552
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELL, MERTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 120786

City NEW BRIGHTON	State MN	Zip Code 55112-0024
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370437

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BELL, MERTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 120786

City NEW BRIGHTON	State MN	Zip Code 55112-0024
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380810

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BELL, MERTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 120786

City NEW BRIGHTON	State MN	Zip Code 55112-0024
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384585

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BELL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 120786
 City NEW BRIGHTON State MN Zip Code 55112-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392071
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BELL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 120786
 City NEW BRIGHTON State MN Zip Code 55112-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402528
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BELL, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9290 E THOMPSON PEAK PARKWAY UNIT
 City SCOTTSDALE State AZ Zip Code 85255-4510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.395821
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 OF 5722

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BELLAIRS, CHRIS, , ,

Mailing Address **8066 PARK LANE
APT 1812**

City DALLAS	State TX	Zip Code 75231-5973
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEAN FOODS	Occupation (for Individual) CFO
--	---

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
---	---

Date of Receipt

07 / 29 / 2016

Transaction ID : SA11A.357986

Amount of Each Receipt this Period

250.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BELLAIRS, CHRIS, , ,

Mailing Address **8066 PARK LANE
APT 1812**

City DALLAS	State TX	Zip Code 75231-5973
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEAN FOODS	Occupation (for Individual) CFO
--	---

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
---	---

Date of Receipt

08 / 19 / 2016

Transaction ID : SA11A.374617

Amount of Each Receipt this Period

250.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BELLANCA, JAMES, , ,

Mailing Address **20480 VERNIER ROAD**

City HARPER WOODS	State MI	Zip Code 48225-1411
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELLANCA, BEATTIE & DELISLE, P.C.	Occupation (for Individual) PARTNER
---	---

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00
---	--

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11A.380111

Amount of Each Receipt this Period

1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 RAVENSTONE LOOP

City COLLEGE STATION	State TX	Zip Code 77845-4871
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362197

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BELLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 RAVENSTONE LOOP

City COLLEGE STATION	State TX	Zip Code 77845-4871
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.370813

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BELLER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 RAVENSTONE LOOP

City COLLEGE STATION	State TX	Zip Code 77845-4871
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399329

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELLOCK, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1030 3RD AVE. S
 412
 City NAPLES State FL Zip Code 34102-6456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383612
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BELLOCK, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1030 3RD AVE. S
 412
 City NAPLES State FL Zip Code 34102-6456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383615
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BELLOCK, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1030 3RD AVE. S
 412
 City NAPLES State FL Zip Code 34102-6456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394339
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELLOCK, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1030 3RD AVE. S
 412
 City NAPLES State FL Zip Code 34102-6456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394347
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BELT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 TOWN PATH
 City GLEN COVE State NY Zip Code 11542-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362815
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. BELT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 TOWN PATH
 City GLEN COVE State NY Zip Code 11542-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393879
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BELT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 TOWN PATH
 City GLEN COVE State NY Zip Code 11542-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417652
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BELYAVSKI, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2626 EL CAMINO REAL
 City REDWOOD CITY State CA Zip Code 94061-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COAST LIGHTING Occupation (for Individual) BUYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378947
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BELYAVSKI, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2626 EL CAMINO REAL
 City REDWOOD CITY State CA Zip Code 94061-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COAST LIGHTING Occupation (for Individual) BUYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378949
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEMIS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 BAINVIEW DR.
 City MINT HILL State NC Zip Code 28227-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418901
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BEMIS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 BAINVIEW DR.
 City MINT HILL State NC Zip Code 28227-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418908
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BEMIS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 BAINVIEW DR.
 City MINT HILL State NC Zip Code 28227-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418916
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEMIS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 BAINVIEW DR.
 City MINT HILL State NC Zip Code 28227-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418922
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BEMIS, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 BAINVIEW DR.
 City MINT HILL State NC Zip Code 28227-7659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418926
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENEDUMFLORIDA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6278
 City SAN ANTONIO State TX Zip Code 78209-0278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL AND GAS PRODUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406247
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENEDUMFLORIDA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6278
 City SAN ANTONIO State TX Zip Code 78209-0278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL AND GAS PRODUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422073
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. BENEFIELD, J, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 ST JAMES AVENUE
 City ST SIMONS ISLAND State GA Zip Code 31522-2273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397332
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BENGTONSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.367000
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 318 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380302
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380305
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390238
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 319 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390253
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409727
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415009
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City WYOMISSING State PA Zip Code 19610-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415016
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BENKOVICH , JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 LISBURN HEIGHTS DR
 City LEWISBERRY State PA Zip Code 17339-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.366962
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BENKOVICH , JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 LISBURN HEIGHTS DR
 City LEWISBERRY State PA Zip Code 17339-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380089
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENKOVICH , JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 414 LISBURN HEIGHTS DR

City LEWISBERRY	State PA	Zip Code 17339-9556
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.385168

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BENKOVICH , JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 414 LISBURN HEIGHTS DR

City LEWISBERRY	State PA	Zip Code 17339-9556
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.408107

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BENKOVICH , JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 414 LISBURN HEIGHTS DR

City LEWISBERRY	State PA	Zip Code 17339-9556
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415251

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 322 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENNETT, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 331081

City ATLANTIC BEACH	State FL	Zip Code 32233-1081
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHEMIST COMPANY OF NORTH FL	Occupation (for Individual) CHEMIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.358438

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BENNETT, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 331081

City ATLANTIC BEACH	State FL	Zip Code 32233-1081
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHEMIST COMPANY OF NORTH FL	Occupation (for Individual) CHEMIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.358439

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BENNETT, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 RINGBOLT ROAD

City HINGHAM	State MA	Zip Code 02043-1413
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384027

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENNETT, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 RINGBOLT ROAD

City HINGHAM	State MA	Zip Code 02043-1413
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384029

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BENNETT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7705 MEADOWLARK LANE #1

City WILMINGTON	State NC	Zip Code 28411-7560
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359591

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BENNETT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7705 MEADOWLARK LANE #1

City WILMINGTON	State NC	Zip Code 28411-7560
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378869

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6416 SW LOOP DR

City PORTLAND	State OR	Zip Code 97221-3385
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2016

Transaction ID : SA11A.344279

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. BENSON, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6416 SW LOOP DR

City PORTLAND	State OR	Zip Code 97221-3385
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359971

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BENSON, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6416 SW LOOP DR

City PORTLAND	State OR	Zip Code 97221-3385
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.362959

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.378748
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.378749
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.378753
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.38754
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.38708
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388329
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 327 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6416 SW LOOP DR

City PORTLAND	State OR	Zip Code 97221-3385
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388330

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BENSON, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6416 SW LOOP DR

City PORTLAND	State OR	Zip Code 97221-3385
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : SA11A.389100

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BENSON, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6416 SW LOOP DR

City PORTLAND	State OR	Zip Code 97221-3385
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394511

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410710
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358221
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358222
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358224
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358333
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 CAJON STREET
 City REDLANDS State CA Zip Code 92373-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359319
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 CAJON STREET
 City REDLANDS State CA Zip Code 92373-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359689
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 CAJON STREET
 City REDLANDS State CA Zip Code 92373-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363163
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 CAJON STREET
 City REDLANDS State CA Zip Code 92373-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373392
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 331 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382476
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 CAJON STREET
 City REDLANDS State CA Zip Code 92373-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386884
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 CAJON STREET
 City REDLANDS State CA Zip Code 92373-5940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400229
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 FAIRWAY OAKS AVE
 City BA NNING State CA Zip Code 92220-6413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405624
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 MILL ROAD
 City RED HOOK State NY Zip Code 12571-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BENSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 FAIRWAY OAKS AVE
 City BA NNING State CA Zip Code 92220-6413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417708
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSYL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 RITZ COVE DR
 City MONARCH BEACH State CA Zip Code 92629-4225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384241
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BENSYL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 RITZ COVE DR
 City MONARCH BEACH State CA Zip Code 92629-4225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419111
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BENTLEY, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1935 BETHESDA ROAD
 City BATESVILLE State AR Zip Code 72501-7925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARSHALL DRY GOODS, INC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376912
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENTLEY, MARYANN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 SHERIDAN LANE
 City GARDNERVILLE State NV Zip Code 89460-6547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380271
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENTLEY, MARYANN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 SHERIDAN LANE
 City GARDNERVILLE State NV Zip Code 89460-6547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380274
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENTLEY, MARYANN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 SHERIDAN LANE
 City GARDNERVILLE State NV Zip Code 89460-6547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409415
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 335 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENTON, JOYCE, LI, MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 678 BEND DR

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : SA11A.348921

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BENTON, JOYCE, LI, MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 678 BEND DR

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.350321

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BENTON, JOYCE, LI, MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 678 BEND DR

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.352759

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENTON, JOYCE, LI, MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 678 BEND DR

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016

Transaction ID : SA11A.374392

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BENTON, JOYCE, LI, MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 678 BEND DR

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.389594

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BENTON, JOYCE, LI, MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 678 BEND DR

City SUNNYVALE	State CA	Zip Code 94087-4224
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEXYN CORP	Occupation (for Individual) QA
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.404969

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 337 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENTZ, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13190 FOLSOM STREET
 City CHICO State CA Zip Code 95973-9798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH VALLEY AS SERVICE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354698
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BENTZ, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13190 FOLSOM STREET
 City CHICO State CA Zip Code 95973-9798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH VALLEY AS SERVICE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366568
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BENTZ, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13190 FOLSOM STREET
 City CHICO State CA Zip Code 95973-9798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH VALLEY AS SERVICE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377429
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 338 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BENTZ, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13190 FOLSOM STREET
 City CHICO State CA Zip Code 95973-9798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH VALLEY AS SERVICE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.387410
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BENTZ, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13190 FOLSOM STREET
 City CHICO State CA Zip Code 95973-9798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH VALLEY AS SERVICE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405120
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BENTZ, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13190 FOLSOM STREET
 City CHICO State CA Zip Code 95973-9798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH VALLEY AS SERVICE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.414774
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 339 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENZIGER, REENIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1340 CHERRY LN
 City LAKE OSWEGO State OR Zip Code 97034-6358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358521
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. BERAN, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3250 W WESTPORT RD
 City PEORIA State IL Zip Code 61615-3955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERCUIT, HENRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 266 SUGARBERRY CIRCLE
 City HOUSTON State TX Zip Code 77024-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368582
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERCUTT, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 266 SUGARBERRY CIRCLE

City HOUSTON	State TX	Zip Code 77024-7211
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.374469

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BERCUTT, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 266 SUGARBERRY CIRCLE

City HOUSTON	State TX	Zip Code 77024-7211
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 24 / 2016
Transaction ID : SA11A.378998

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BERCUTT, HENRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 266 SUGARBERRY CIRCLE

City HOUSTON	State TX	Zip Code 77024-7211
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 13 / 2016
Transaction ID : SA11A.394451

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERDIS, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3680 AUBUSSON TRACE
 City ALPHARETTA State GA Zip Code 30022-6165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.391612
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BEREN, ROBERT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13840 LE MANS WAY
 City PALM BEACH GARDENS State FL Zip Code 33410-1266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEREXCO LLC Occupation (for Individual) OIL & GAS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363556
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BEREN, ROBERT, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13840 LE MANS WAY
 City PALM BEACH GARDENS State FL Zip Code 33410-1266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEREXCO LLC Occupation (for Individual) OIL & GAS EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369497
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERENSTAIN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 HILLSIDE DRIVE E
 City SEATTLE State WA Zip Code 98112-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365172
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERENSTAIN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 HILLSIDE DRIVE E
 City SEATTLE State WA Zip Code 98112-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392396
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BERES, MILAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 ISINGLASS TER
 City TRUMBULL State CT Zip Code 06611-4038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394156
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 343 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERG, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4028 CALLE ISABELLA
 City SAN CLEMENTE State CA Zip Code 92672-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417662
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. BERG, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8111 COLEGIO DRIVE
 City LOS ANGELES State CA Zip Code 90045-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LECO CORP Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349157
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BERG, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8111 COLEGIO DRIVE
 City LOS ANGELES State CA Zip Code 90045-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LECO CORP Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386237
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERG, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8111 COLEGIO DRIVE
 City LOS ANGELES State CA Zip Code 90045-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LECO CORP Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402401
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERG, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 N. INDIAN RIVER DRIVE STE 300
 City FORT PIERCE State FL Zip Code 34950-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372794
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BERG, THEODORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MICHIGAN RD
 City NEW CANAAN State CT Zip Code 06840-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349565
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 610.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 345 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERG, THEODORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MICHIGAN RD
 City NEW CANAAN State CT Zip Code 06840-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349567
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BERG, THEODORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MICHIGAN RD
 City NEW CANAAN State CT Zip Code 06840-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERG, THEODORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MICHIGAN RD
 City NEW CANAAN State CT Zip Code 06840-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349580
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 346 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERG, THEODORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MICHIGAN RD
 City NEW CANAAN State CT Zip Code 06840-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374699
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BERG, THEODORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MICHIGAN RD
 City NEW CANAAN State CT Zip Code 06840-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399549
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERGHOFF, HERMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 W ADAMS STREET
 City CHICAGO State IL Zip Code 60603-5502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366322
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGMANN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX
 City PARK CITY State UT Zip Code 84060-0381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA PEGASUS MGT LLC Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353475
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERGMANN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX
 City PARK CITY State UT Zip Code 84060-0381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA PEGASUS MGT LLC Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355333
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERGMANN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX
 City PARK CITY State UT Zip Code 84060-0381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA PEGASUS MGT LLC Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408568
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGMANN, PEGGY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX

City PARK CITY	State UT	Zip Code 84060-0381
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELTA PEGASUS MGT LLC	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413314

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BERGMANN, PEGGY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX

City PARK CITY	State UT	Zip Code 84060-0381
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELTA PEGASUS MGT LLC	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413804

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BERGMANN, PEGGY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX

City PARK CITY	State UT	Zip Code 84060-0381
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELTA PEGASUS MGT LLC	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420430

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 349 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERGMANN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8879 PROMONTORY RANCH ROAD, PO BOX
 City PARK CITY State UT Zip Code 84060-0381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA PEGASUS MGT LLC Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420433
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BERGUM, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 BAY POINT LN
 City HARTLAND State WI Zip Code 53029-9343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349439
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERLEY, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 CORDWAINER DRIVE SUITE 202
 City NORWELL State MA Zip Code 02061-1671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCLEAN HOSPITAL Occupation (for Individual) PSYCHIATRIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350649
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 350 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERLEY, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 CORDWAINER DRIVE
 SUITE 202
 City NORWELL State MA Zip Code 02061-1671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCLEAN HOSPITAL Occupation (for Individual) PSYCHIATRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384033
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERLIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12407 DOVER RD
 City REISTERSTOWN State MD Zip Code 21136-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357237
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERLIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12407 DOVER RD
 City REISTERSTOWN State MD Zip Code 21136-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382702
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 351 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERLIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12407 DOVER RD
 City REISTERSTOWN State MD Zip Code 21136-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412995
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BERNARD, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 PACKER ROAD
 City OAK RIDGE State TN Zip Code 37830-5113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384185
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BERNARD, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 PACKER ROAD
 City OAK RIDGE State TN Zip Code 37830-5113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384205
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 352 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNARD, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 PACKER ROAD
 City OAK RIDGE State TN Zip Code 37830-5113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399445
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BERNAU, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5995 S RACE COURT
 City CENTENNIAL State CO Zip Code 80121-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377952
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369929
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406066
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406073
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406102
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406105
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406107
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BERNARD, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7718 72ND STREET NE
 City MARYSVILLE State WA Zip Code 98270-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIRLINE INSPECTION SERVICE Occupation (for Individual) AIRCRAFT INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406111
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSTEIN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17675 LAKE ESTATES DRIVE
 City BOCA RATON State FL Zip Code 33496-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.369040
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERNSTEIN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17675 LAKE ESTATES DRIVE
 City BOCA RATON State FL Zip Code 33496-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.398122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERNSTEIN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17675 LAKE ESTATES DRIVE
 City BOCA RATON State FL Zip Code 33496-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410832
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 356 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSTEIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8975 CANYON RIDGE LANE
 City CINCINNATI State OH Zip Code 45249-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386790
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERNSTEIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8975 CANYON RIDGE LANE
 City CINCINNATI State OH Zip Code 45249-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386797
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERNSTEIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8975 CANYON RIDGE LANE
 City CINCINNATI State OH Zip Code 45249-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418945
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSTEIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8975 CANYON RIDGE LANE
 City CINCINNATI State OH Zip Code 45249-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERNSTEIN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15912 75TH PLACE W
 City EDMONDS State WA Zip Code 98026-4523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376693
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353314
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 358 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358173
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358174
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358387
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362284
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.374986
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379789
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379790
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380462
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380463
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 361 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BERNSON, JANE, , ,		Date of Receipt MM / DD / YYYY 08 / 26 / 2016
Mailing Address 27 NORWOOD ST 263		Transaction ID : SA11A.380468
City EVERETT	State MA	Zip Code 02149-2709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BERNSON, JANE, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 27 NORWOOD ST 263		Transaction ID : SA11A.381859
City EVERETT	State MA	Zip Code 02149-2709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BERNSON, JANE, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 27 NORWOOD ST 263		Transaction ID : SA11A.381866
City EVERETT	State MA	Zip Code 02149-2709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 490.00	

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386625

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2016

Transaction ID : SA11A.387721

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NORWOOD ST
263

City EVERETT State MA Zip Code 02149-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
490.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2016

Transaction ID : SA11A.387722

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387725
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387726
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390339
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 20.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390340
 Amount of Each Receipt this Period
 10.00
 Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390470
 Amount of Each Receipt this Period
 15.00
 Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390884
 Amount of Each Receipt this Period
 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 365 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390885
 Amount of Each Receipt this Period
 5.00
 Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391799
 Amount of Each Receipt this Period
 10.00
 Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398304
 Amount of Each Receipt this Period
 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 366 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 09 / 20 / 2016
Transaction ID : SA11A.401592
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.404156
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.404158
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404452
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404453
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407531
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

20.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 368 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412079
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412080
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.418586
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 NORWOOD ST
 263
 City EVERETT State MA Zip Code 02149-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418919
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. BERNSTEIN, MIRIAM, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 532 CRAIG LANE
 City VILLANOVA State PA Zip Code 19085-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.380943
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BERNSTEIN, RICHARD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1054 31ST STREET NW SUITE 1000
 City WASHINGTON State DC Zip Code 20007-6030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397178
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1280.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 370 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERNTHAL, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4936 30TH PL, NW
 City WASHINGTON State DC Zip Code 20008-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389132
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BERQUIST, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 MONTE VISTA DRIVE
 City SANTA PAULA State CA Zip Code 93060-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOTHER OF DIVINE GRACE SCHOOL Occupation (for Individual) TEACHER/DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 04 / 2016
Transaction ID : SA11A.344189
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERQUIST, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 MONTE VISTA DRIVE
 City SANTA PAULA State CA Zip Code 93060-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOTHER OF DIVINE GRACE SCHOOL Occupation (for Individual) TEACHER/DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 04 / 2016
Transaction ID : SA11A.344190
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 371 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERQUIST, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 MONTE VISTA DRIVE
 City SANTA PAULA State CA Zip Code 93060-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOTHER OF DIVINE GRACE SCHOOL Occupation (for Individual) TEACHER/DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378709
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERQUIST, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 MONTE VISTA DRIVE
 City SANTA PAULA State CA Zip Code 93060-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOTHER OF DIVINE GRACE SCHOOL Occupation (for Individual) TEACHER/DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403214
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERQUIST, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 MONTE VISTA DRIVE
 City SANTA PAULA State CA Zip Code 93060-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOTHER OF DIVINE GRACE SCHOOL Occupation (for Individual) TEACHER/DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418968
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 372 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 CLOVER LANE
 City EAGLE State WI Zip Code 53119-2051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358318
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BERRY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 CLOVER LANE
 City EAGLE State WI Zip Code 53119-2051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382420
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BERRY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 CLOVER LANE
 City EAGLE State WI Zip Code 53119-2051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416111
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 373 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 S REMINGTON
 City ANGLETON State TX Zip Code 77515-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAGEMEYER NORTH AMERICA Occupation (for Individual) INDUSTRIAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357414
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BERRY, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 S REMINGTON
 City ANGLETON State TX Zip Code 77515-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAGEMEYER NORTH AMERICA Occupation (for Individual) INDUSTRIAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.370921
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BERRY, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 S REMINGTON
 City ANGLETON State TX Zip Code 77515-3378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAGEMEYER NORTH AMERICA Occupation (for Individual) INDUSTRIAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403750
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 374 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, WANDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7717 SETTER TRACE LANE

City CHARLOTTE	State NC	Zip Code 28216-1176
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TECHNICAL ASSOCIATES OF CHARLOTTE, PC	Occupation (for Individual) CORPORATE SECRETARY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370380

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BERRY, WILBUR, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 SEVENTH AVENUE, NE

City JACKSONVILLE	State AL	Zip Code 36265-1165
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372951

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BERRY, WILBUR, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 SEVENTH AVENUE, NE

City JACKSONVILLE	State AL	Zip Code 36265-1165
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399765

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 375 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERRY, WILBUR, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1104 SEVENTH AVENUE, NE
City JACKSONVILLE State AL Zip Code 36265-1165
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399766
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERRY, WILBUR, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1104 SEVENTH AVENUE, NE
City JACKSONVILLE State AL Zip Code 36265-1165
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416391
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BERRY, WILLIAM, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 28 TRAIL RIDGE ROAD
City SAPULPA State OK Zip Code 74066-9314
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) AMERICAN HERITAGE BA K Occupation (for Individual) BANKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414391
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 376 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERTA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 MIDWAY DRIVE
 City WOODLAND State CA Zip Code 95695-5235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.361207
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. BERTA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 MIDWAY DRIVE
 City WOODLAND State CA Zip Code 95695-5235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389523
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. BERTRAND, DUDLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 DUPONT CIRCLE
 City WEST MONROE State LA Zip Code 71291-4715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359207
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERTRAND, DUDLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 DUPONT CIRCLE
 City WEST MONROE State LA Zip Code 71291-4715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380180
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BERTZ, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 VALLEY WOODS DR
 City VERONA State WI Zip Code 53593-9748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356290
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. BERTZ, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 VALLEY WOODS DR
 City VERONA State WI Zip Code 53593-9748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383022
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERTZ, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3432 VALLEY WOODS DR

City VERONA	State WI	Zip Code 53593-9748
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411280

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. BESTWICK, MIRIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 DORCHESTER TOWERS
410

City PITTSBURGH	State PA	Zip Code 15241-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387159

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BESTWICK, MIRIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 DORCHESTER TOWERS
410

City PITTSBURGH	State PA	Zip Code 15241-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11A.389292

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 379 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BESTWICK, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 DORCHESTER TOWERS
 410
 City PITTSBURGH State PA Zip Code 15241-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412348
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BETTAG-SMITH, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 127
 City MARIAH HILL State IN Zip Code 47556-0127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357382
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. BETTAG-SMITH, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 127
 City MARIAH HILL State IN Zip Code 47556-0127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357385
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 700.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 380 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BETTGER, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16802 STONEHAVEN CR
 City HUNTINGTON BEACH State CA Zip Code 92649-4028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.354003
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BETTGER, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16802 STONEHAVEN CR
 City HUNTINGTON BEACH State CA Zip Code 92649-4028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357168
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. BETTGER, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16802 STONEHAVEN CR
 City HUNTINGTON BEACH State CA Zip Code 92649-4028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.392203
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BETTIN, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 FAIRWAY COURT
 City ATLANTIS State FL Zip Code 33462-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374368
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BETTIN, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 FAIRWAY COURT
 City ATLANTIS State FL Zip Code 33462-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380504
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BETTIN, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 FAIRWAY COURT
 City ATLANTIS State FL Zip Code 33462-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390288
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 382 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BETTIN, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 FAIRWAY COURT
 City ATLANTIS State FL Zip Code 33462-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394142
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BETTIN, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 FAIRWAY COURT
 City ATLANTIS State FL Zip Code 33462-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405095
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BETTS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2856 CEDAR GROVE LOOP
 City THE VILLAGES State FL Zip Code 32163-2670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387717
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BETZ, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11767 KATY FWY #1100

City HOUSTON	State TX	Zip Code 77079-1754
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE BETZ COMPANIES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344464

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BETZ, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11767 KATY FWY #1100

City HOUSTON	State TX	Zip Code 77079-1754
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE BETZ COMPANIES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355510

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. BETZ, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11767 KATY FWY #1100

City HOUSTON	State TX	Zip Code 77079-1754
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE BETZ COMPANIES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409526

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEULE, JANE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 KING ST
 City REDWOOD CITY State CA Zip Code 94062-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRIFFIN BLACK Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407913
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BEULIGMANN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 DANA COURT
 City CARLSBAD State CA Zip Code 92008-2076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.376312
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BEULIGMANN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 DANA COURT
 City CARLSBAD State CA Zip Code 92008-2076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408422
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 385 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEWICK, HELEN, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7510 CONIFER COURT
 City TEMPERANCE State MI Zip Code 48182-1682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365235
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BEWICK, HELEN, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7510 CONIFER COURT
 City TEMPERANCE State MI Zip Code 48182-1682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381332
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BEWTRA, NARINDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ANDERSON AVE,
 City DEMAREST State NJ Zip Code 07627-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400739
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEYER, LARRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2094 CAROL AVENUE
 City MOUNTAIN VIEW State CA Zip Code 94040-3809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361171
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BEYER, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 HUNTERS VIEW STREET
 City SAN ANTONIO State TX Zip Code 78230-2032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389586
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BEZNOS, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31731 NW HIGHWAY STE 250W
 City FARMINGTON HILLS State MI Zip Code 48334-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367967
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 387 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BHAGWAN, SUDHIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13940 NW HARVEST LANE
 City PORTLAND State OR Zip Code 97229-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.382954
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BHAGWAN, SUDHIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13940 NW HARVEST LANE
 City PORTLAND State OR Zip Code 97229-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BIALEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 WINDING WAY
 City REDWOOD CITY State CA Zip Code 94062-2539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378559
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 388 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIALKIN, KENNETH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 CENTRAL PARK W
 City NEW YORK State NY Zip Code 10024-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKADDEN ATTORNEYS Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 05 / 2016**
Transaction ID : SA11A.345212
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BIARD, J. ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6140 PLUM VALLEY PLACE
 City FORT WORTH State TX Zip Code 76116-8414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.376909
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BIDDLE, LAFAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 101780
 City DENVER State CO Zip Code 80250-1780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.354430
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 389 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIDDLE, ROYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3045 JACOBS CIRCLE
City KALAMAZOO State MI Zip Code 49009-4419
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) PREMIER RADIOLOGY Occupation (for Individual) DOCTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364272
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BIEBIGHAUSER, VICTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2424 CHEROKEE DRIVE
City MONTGOMERY State AL Zip Code 36111-1609
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SOUTH UNIVERSITY OF ALABAMA, INC Occupation (for Individual) PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388136
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BIEDERMAN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 621 SUNRISE DR.
City GOLDEN State CO Zip Code 80401-7233
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354438
Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 390 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIEKER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 2920**
 City **SUN VALLEY** State ID Zip Code **83353-2920**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.397364
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

B. BIERMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **5946 EVEN MUST CV**
 City **MEMPHIS** State ID Zip Code **TN 38120-4108**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **GASTROINTESTINAL SPECIALISTS FOUNDATIO** Occupation (for Individual) **PHYSICIAN**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **342.00**

Date of Receipt **07 / 11 / 2016**
Transaction ID : SA11A.346534
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

C. BIGGERSTAFF, TED, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **3801 FARI VIEW DRIVE**
 City **AUSTIN** State ID Zip Code **TX 78730-3323**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378260
 Amount of Each Receipt this Period **1000.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1300.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 391 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BIJUR, KJESTINE, , ,

Mailing Address 10855 CHARLESTON DRIVE

City VERO BEACH State FL Zip Code 32963-4797

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 07 / 14 / 2016
Transaction ID : SA11A.347625

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BIJUR, KJESTINE, , ,

Mailing Address 10855 CHARLESTON DRIVE

City VERO BEACH State FL Zip Code 32963-4797

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 07 / 22 / 2016
Transaction ID : SA11A.353838

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BIJUR, KJESTINE, , ,

Mailing Address 10855 CHARLESTON DRIVE

City VERO BEACH State FL Zip Code 32963-4797

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 07 / 26 / 2016
Transaction ID : SA11A.355626

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 392 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIJUR, KJESTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10855 CHARLESTON DRIVE

City VERO BEACH	State FL	Zip Code 32963-4797
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : SA11A.369200

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BIJUR, KJESTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10855 CHARLESTON DRIVE

City VERO BEACH	State FL	Zip Code 32963-4797
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.396824

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BILES, GLORIA, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2110 AMBERLY COURT

City HOUSTON	State TX	Zip Code 77063-1954
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.393852

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 393 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BILES, GLORIA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 AMBERLY COURT
 City HOUSTON State TX Zip Code 77063-1954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394836
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. BILLANO, OMAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2831 SHOOK HILL CIRCLE
 City BIRMINGHAM State AL Zip Code 35223-2618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411794
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BILLERBECK, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14816 WILDEN DRIVE
 City URBANDALE State IA Zip Code 50323-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389134
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 394 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BILLIN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10511 JOHANNA AVENUE

City SHADOW HILLS	State CA	Zip Code 91040-1645
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOS ANGELES COUNTY	Occupation (for Individual) SOCIAL SERVICES ADMINISTRATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.353912

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BILLIN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10511 JOHANNA AVENUE

City SHADOW HILLS	State CA	Zip Code 91040-1645
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOS ANGELES COUNTY	Occupation (for Individual) SOCIAL SERVICES ADMINISTRATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359585

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. BILLIN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10511 JOHANNA AVENUE

City SHADOW HILLS	State CA	Zip Code 91040-1645
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOS ANGELES COUNTY	Occupation (for Individual) SOCIAL SERVICES ADMINISTRATOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420035

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 395 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BILLINGSLEY, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 RAMPART PASS
 City WACCABUC State NY Zip Code 10597-1017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN & WAKEFIELD Occupation (for Individual) COMMERCIAL REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392537
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BILLINGSLEY, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 RAMPART PASS
 City WACCABUC State NY Zip Code 10597-1017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN & WAKEFIELD Occupation (for Individual) COMMERCIAL REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414394
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BING, D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 487
 City MINDEN State NV Zip Code 89423-0487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESIDENT Occupation (for Individual) BING CONST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 369.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363815
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1347.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 396 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BING, D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 487
 City MINDEN State NV Zip Code 89423-0487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESIDENT Occupation (for Individual) BING CONST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 369.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418159
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BINGER, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42816 POPLAR LANE
 City BIG ARM State MT Zip Code 59910-9019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396572
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BINGHAM, ALBERT, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2308 TROON CT
 City SANIBEL State FL Zip Code 33957-2218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BULKMATIC Occupation (for Individual) TRUCKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 41000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.375447
 Amount of Each Receipt this Period 41000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	42075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 397 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BINGHAM, BILL, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 635 SHASTA DR
 City ENCINITAS State CA Zip Code 92024-2380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360121
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BINGHAM, BILL, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 635 SHASTA DR
 City ENCINITAS State CA Zip Code 92024-2380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387505
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BINIG, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2107 LOOSCAN LN
 City HOUSTON State TX Zip Code 77019-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALLARD EXPLORATION Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411111
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 398 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIOLCHINI, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1744 E 29TH STREET
 City TULSA State OK Zip Code 74114-5402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENNWELL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381207
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BIOLCHINI, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1744 E 29TH STREET
 City TULSA State OK Zip Code 74114-5402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENNWELL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.396029
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BIRCH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3757 N KINGSWOOD DRIVE
 City BOISE State ID Zip Code 83704-4324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361193
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 399 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIRGEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 14849
 City GREENSBORO State NC Zip Code 27415-4849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350371
 Amount of Each Receipt this Period 65.00
 Memo Item CONTRIBUTION

B. BIRGEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 14849
 City GREENSBORO State NC Zip Code 27415-4849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398828
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BIRKELAND, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26515 DAPPLE GREY DRIVE
 City LAGUNA HILLS State CA Zip Code 92653-5711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTERPRISE PROPERTY COMPANY, LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357136
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	565.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BISBEE, FREDERICK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 ELKS CLUB ROAD
 City BOALSBURG State PA Zip Code 16827-1682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378264
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BISBEE, FREDERICK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 ELKS CLUB ROAD
 City BOALSBURG State PA Zip Code 16827-1682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389531
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BIASE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1983 PORT SEABOURNE WAY
 City NEWPORT BEACH State CA Zip Code 92660-6635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 320.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417794
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 401 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BISGROVE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 LOGAN ST
 110
 City AUBURN State NY Zip Code 13021-4372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358403
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BISGROVE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 LOGAN ST
 110
 City AUBURN State NY Zip Code 13021-4372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394270
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BISGROVE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 LOGAN ST
 110
 City AUBURN State NY Zip Code 13021-4372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394285
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 402 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BISHOP, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 WESTWOOD WAY
 City SAN ANTONIO State TX Zip Code 78218-1717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.360254
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. BITTINGER, FRANK, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15568 LACUNA DRIVE
 City MONUMENT State CO Zip Code 80132-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417153
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BJORKMAN, STEVE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2577 BRAZILIA COURT
 City PUNTA GORDA State FL Zip Code 33950-6301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BJM CORP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384305
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BJORKMAN, STEVE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2577 BRAZILIA COURT
 City PUNTA GORDA State FL Zip Code 33950-6301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BJM CORP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BLACK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2322 PENDANT PASS
 City SAN ANTONIO State TX Zip Code 78232-5601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389122
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BLACK, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2319 CLIPPER LANE
 City KNOXVILLE State TN Zip Code 37922-6184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TN UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379665
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 RUSTIC LANE
 City DECATUR State IL Zip Code 62521-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACK& COMPANY Occupation (for Individual) MANAGMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350858
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BLACK, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 RUSTIC LANE
 City DECATUR State IL Zip Code 62521-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACK& COMPANY Occupation (for Individual) MANAGMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365001
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BLACK, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 RUSTIC LANE
 City DECATUR State IL Zip Code 62521-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACK& COMPANY Occupation (for Individual) MANAGMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408129
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344441
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359032
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360140
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 406 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360141
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360142
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389310
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 407 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKSHEAR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 BAY POINT DR
 City GALLATIN State TN Zip Code 37066-4486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416763
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BLACK, MARTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 CEDAR LAKE EAST
 City DENVILLE State NJ Zip Code 07834-1870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.358458
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. BLACKWELL, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3864 MARIETTA WAY
 City SAINT CLOUD State FL Zip Code 34772-8711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNERSTONE FAMILY CHURCH Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405676
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 408 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKWELL, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3864 MARIETTA WAY
 City SAINT CLOUD State FL Zip Code 34772-8711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNERSTONE FAMILY CHURCH Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407472
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BLACKWELL, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3864 MARIETTA WAY
 City SAINT CLOUD State FL Zip Code 34772-8711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNERSTONE FAMILY CHURCH Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BLACKWELL, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3864 MARIETTA WAY
 City SAINT CLOUD State FL Zip Code 34772-8711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNERSTONE FAMILY CHURCH Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413898
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 409 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 SOUTH BATTERY
 City CHARLESTON State SC Zip Code 29401-2325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361468
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BLACK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 SOUTH BATTERY
 City CHARLESTON State SC Zip Code 29401-2325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410625
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. BLACKMORE, SAMUEL, S., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 PRINCETON LANE
 City WEST CHESTER State PA Zip Code 19380-5743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392451
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5520.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 410 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368293
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390096
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390103
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 411 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390104
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400754
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BLACKMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13591 NOGALES DR
 City DEL MAR State CA Zip Code 92014-3349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403018
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 412 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAIR, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7924 FOREST KEEP CIR

City PARKER	State CO	Zip Code 80134-6407
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347595

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BLAKE, HELEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6799 S MARINA WAY

City STUART	State FL	Zip Code 34996-1947
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
706.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355763

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BLAKE, HELEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6799 S MARINA WAY

City STUART	State FL	Zip Code 34996-1947
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
706.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.366988

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 413 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAKE, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6799 S MARINA WAY
 City STUART State FL Zip Code 34996-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380762
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BLAKE, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6799 S MARINA WAY
 City STUART State FL Zip Code 34996-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390499
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BLAKE, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6799 S MARINA WAY
 City STUART State FL Zip Code 34996-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.393650
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 414 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAKE, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6799 S MARINA WAY
 City STUART State FL Zip Code 34996-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408133
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BLAKE, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 356 SEABREEZE DRIVE
 City MARCO ISLAND State FL Zip Code 34145-1827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354684
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. BLAKE, KRISTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 SPRY ISLAND RD
 City JOPPA State MD Zip Code 21085-5440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLAKES CRABHOUSE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384363
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 415 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAKE, KRISTI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 SPRY ISLAND RD

City JOPPA	State MD	Zip Code 21085-5440
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLAKES CRABHOUSE	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384371

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BLAKE, KRISTI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 SPRY ISLAND RD

City JOPPA	State MD	Zip Code 21085-5440
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLAKES CRABHOUSE	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384373

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BLAKE, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3004 REBA DRIVE

City HOUSTON	State TX	Zip Code 77019-6204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT APPLICABLE	Occupation (for Individual) HOMEMAKER & INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379898

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 416 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAKE, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3004 REBA DRIVE

City HOUSTON	State TX	Zip Code 77019-6204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT APPLICABLE	Occupation (for Individual) HOMEMAKER & INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.411707

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BLAKE, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 356 SEABREEZE DRIVE

City MARCO ISLAND	State FL	Zip Code 34145-1827
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368210

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BLAKEMORE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2951 QUAIL HOLLOW DR

City FAIRFIELD	State CA	Zip Code 94534-8305
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409162

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 417 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLALOCK, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 WEST BRADDOCK ROAD
 City ALEXANDRIA State VA Zip Code 22302-4104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIERCE GOVERNMENT RELATIONS Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375661
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

B. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346908
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349586
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 418 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361981
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365763
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370499
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 419 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384578
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384579
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384662
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

136.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 420 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384664
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384673
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BLAMEY, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7603 FOUR MIKE CREEK RD
 City THREE LAKES State TX Zip Code 54562-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 786.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393643
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 421 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLANCHARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6001 RIVER ROAD, SUITE 100
 STE 100
 City COLUMBUS State GA Zip Code 31904-2949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368294
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BLANK, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1582 MEDINA ROAD
 City LONG LAKE State MN Zip Code 55356-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356630
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. BLAUVELT, FOWLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 REGENCY SQUARE APT 227E
 City VERO BEACH State FL Zip Code 32967-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349601
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 422 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744
 City RIDGECREST State CA Zip Code 93556-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344497
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

B. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744
 City RIDGECREST State CA Zip Code 93556-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344498
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

C. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744
 City RIDGECREST State CA Zip Code 93556-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344499
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	96.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 423 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744

City RIDGECREST	State CA	Zip Code 93556-1744
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344505

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

B. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744

City RIDGECREST	State CA	Zip Code 93556-1744
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.359016

Amount of Each Receipt this Period
32.00

Memo Item CONTRIBUTION

C. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744

City RIDGECREST	State CA	Zip Code 93556-1744
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359633

Amount of Each Receipt this Period
38.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	97.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 424 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744
 City RIDGECREST State CA Zip Code 93556-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375650
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744
 City RIDGECREST State CA Zip Code 93556-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375652
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BLECHA, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1744
 City RIDGECREST State CA Zip Code 93556-1744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375653
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 425 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLECHA, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1744**

City RIDGECREST	State CA	Zip Code 93556-1744
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
08 / 22 / 2016

Transaction ID : SA11A.375654

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BLECHA, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 1744**

City RIDGECREST	State CA	Zip Code 93556-1744
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
09 / 02 / 2016

Transaction ID : SA11A.389306

Amount of Each Receipt this Period
32.00

Memo Item CONTRIBUTION

C. BLEIBERG, PAUL, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2401 CALVERT ST NW APT 321**

City WASHINGTON	State DC	Zip Code 20008-2662
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REP. REID RIBBLE	Occupation (for Individual) DEPUTY CHIEF OF STAFF
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
08 / 31 / 2016

Transaction ID : SA11A.383555

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	307.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 426 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLESSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5081
 City BROOKFIELD State CT Zip Code 06804-5081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALDINE METAL PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365681
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BLESSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5081
 City BROOKFIELD State CT Zip Code 06804-5081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALDINE METAL PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370501
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLESSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5081
 City BROOKFIELD State CT Zip Code 06804-5081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALDINE METAL PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394396
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 427 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLESSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5081
 City BROOKFIELD State CT Zip Code 06804-5081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALDINE METAL PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412353
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BLESSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5081
 City BROOKFIELD State CT Zip Code 06804-5081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALDINE METAL PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412366
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BLESSING, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28750 BLAISDELL DRIVE
 City NAPLES State FL Zip Code 34119-0903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2016
Transaction ID : SA11A.349098
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 428 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLESSING, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28750 BLAISDELL DRIVE
 City NAPLES State FL Zip Code 34119-0903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357943
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BLIGHT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1386 NORTH 1000 EAST
 City AMERICAN FORK State UT Zip Code 84003-8869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANCESTRY Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.363075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BLIGHT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1386 NORTH 1000 EAST
 City AMERICAN FORK State UT Zip Code 84003-8869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANCESTRY Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391941
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 429 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLIGHT, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1386 NORTH 1000 EAST

City AMERICAN FORK	State UT	Zip Code 84003-8869
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANCESTRY	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391942

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BLIGHT, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1386 NORTH 1000 EAST

City AMERICAN FORK	State UT	Zip Code 84003-8869
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANCESTRY	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391943

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BLINKENBERG, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5099 DASSIA WAY

City OCEANSIDE	State CA	Zip Code 92056-7432
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

Transaction ID : SA11A.346862

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 430 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLISH, NELSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3840 EAST AVENUE
 City ROCHESTER State NY Zip Code 14618-3729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383434
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BLISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3156 N 34TH STREET
 City HOLLYWOOD State FL Zip Code 33021-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 322.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364431
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3156 N 34TH STREET
 City HOLLYWOOD State FL Zip Code 33021-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 322.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397633
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 590.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 431 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLISS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3156 N 34TH STREET

City HOLLYWOOD	State FL	Zip Code 33021-2626
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409436

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BLISS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3156 N 34TH STREET

City HOLLYWOOD	State FL	Zip Code 33021-2626
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411544

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BLISS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3156 N 34TH STREET

City HOLLYWOOD	State FL	Zip Code 33021-2626
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
322.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.411644

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 432 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLITZ, SANDFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 183 BIRCH TREE DRIVE

City HUDSON	State ME	Zip Code 04449-3308
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350282

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BLOCK, LAWRENCE, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 206 DEANNE DR.

City LAKEWOOD	State NJ	Zip Code 08701-7315
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350611

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. BLOCK, LAWRENCE, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 206 DEANNE DR.

City LAKEWOOD	State NJ	Zip Code 08701-7315
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374636

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOCK, LAWRENCE, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 DEANNE DR.
 City LAKEWOOD State NJ Zip Code 08701-7315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3025.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399689
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BLODGETT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5010 BURRELL DRIVE
 City SHEFFIELD VILLAGE State OH Zip Code 44054-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368963
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLODGETT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5010 BURRELL DRIVE
 City SHEFFIELD VILLAGE State OH Zip Code 44054-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398732
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 434 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOMBERG, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E 1847 MELODY LANE
 City WAUPACA State WI Zip Code 54981-8173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350284
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. BLOMBERG, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E 1847 MELODY LANE
 City WAUPACA State WI Zip Code 54981-8173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370330
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BLOOMFIELD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 SE 45TH COURT
 City BELLEVUE State WA Zip Code 98006-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366688
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 435 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOOMFIELD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 SE 45TH COURT
 City BELLEVUE State WA Zip Code 98006-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380187
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BLOOMFIELD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 SE 45TH COURT
 City BELLEVUE State WA Zip Code 98006-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387158
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BLOOMFIELD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 SE 45TH COURT
 City BELLEVUE State WA Zip Code 98006-2341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390465
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 436 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOOM, SEYMOUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 BURNHAM ROAD
 City AVON State CT Zip Code 06001-2535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.377638
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BLOOM, SEYMOUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 BURNHAM ROAD
 City AVON State CT Zip Code 06001-2535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.380189
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BLOOM, SEYMOUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 BURNHAM ROAD
 City AVON State CT Zip Code 06001-2535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 08 / 2016
Transaction ID : SA11A.391880
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 437 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOOM, SEYMOUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 BURNHAM ROAD
 City AVON State CT Zip Code 06001-2535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394572
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BLOOM, SEYMOUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 BURNHAM ROAD
 City AVON State CT Zip Code 06001-2535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415889
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BLOOM, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 COWPER ST.
 City PALO ALTO State CA Zip Code 94306-3002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359939
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 159.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 438 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLOOM, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 COWPER ST.
 City PALO ALTO State CA Zip Code 94306-3002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384819
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. BLOOM, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 COWPER ST.
 City PALO ALTO State CA Zip Code 94306-3002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419635
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. BLOUNT, LAMAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2166
 City ROSWELL State GA Zip Code 30077-2166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOEL SERVICES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350640
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 318.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 439 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BLOUNT, LAMAR, , ,

Mailing Address **PO BOX 2166**

City **ROSWELL** State **GA** Zip Code **30077-2166**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NOEL SERVICES** Occupation (for Individual) **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416721

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BLUEDORN, TODD, , ,

Mailing Address **6315 PARK LANE**

City **DALLAS** State **TX** Zip Code **75225-2108**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LENNOX INTERNATIONAL** Occupation (for Individual) **CHAIRMAN & CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
08 / 03 / 2016

Transaction ID : SA11A.362049

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BLUM, ANDREW, , ,

Mailing Address **320 E 57TH STREET, APT 4B**

City **NEW YORK** State **NY** Zip Code **10022-2485**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **C L KING & ASSOC** Occupation (for Individual) **MANAGING DIRECTOR**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.401088

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **3050.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 440 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLUM, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 INDIGO LANE UNIT 159

City GLENVIEW	State IL	Zip Code 60026-8301
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414736

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. BLUMSTEIN, JAMES, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2113 HAMPTON AVENUE

City NASHVILLE	State TN	Zip Code 37215-1401
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401118

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BLURTON, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11808 WIND ROAD

City HOUSTON	State TX	Zip Code 77024-7133
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389484

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 441 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLYTHE, HARRY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4520 ADEAIDA ROAD
 City PASO ROBLES State CA Zip Code 93446-9782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377870
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BOARDMAN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 SOUTH JEFFERSON ST.
 City CROSBYTON State TX Zip Code 79322-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406189
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOATES, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 SHARPS COVE RD.
 City GURLEY State AL Zip Code 35748-8210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419763
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 442 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOCKRATH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2314 W 17TH ST
 City WILMINGTON State DE Zip Code 19806-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 07 / 24 / 2016
Transaction ID : SA11A.354562
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BOCKRATH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2314 W 17TH ST
 City WILMINGTON State DE Zip Code 19806-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359174
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. BOCKRATH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2314 W 17TH ST
 City WILMINGTON State DE Zip Code 19806-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382640
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 443 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BOCKRATH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2314 W 17TH ST
 City WILMINGTON State DE Zip Code 19806-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382642
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BODDIE, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 MERGANSER CV
 City ROCKY MOUNT State NC Zip Code 27804-6336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361395
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BODE, JOHN, W., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 PENNSYLVANIA AVE NW STE 950
 City WASHINGTON State DC Zip Code 20006-5806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORN REFINERS ASSOCIATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377667
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 444 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BODENSTAB, ALEX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 FAWN LANE

City CHADDS FORD State PA Zip Code 19317-9172

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST STATE ORTHOPAEDICS Occupation (for Individual) ORTHOPAEDIC SURGEON

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **07 / 23 / 2016**

Transaction ID : SA11A.354619

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

B. BODENMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 N LAKE SHORE DRIVE APT 15A

City CHICAGO State IL Zip Code 60610-6649

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 18 / 2016**

Transaction ID : SA11A.371180

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

C. BODIE, CARROLL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 GREGORIA COURT

City BALTIMORE State MD Zip Code 21212-1050

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 23 / 2016**

Transaction ID : SA11A.376954

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 445 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOEHNER, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 767 3RD AVENUE FL 4
 City NEW YORK State NY Zip Code 10017-9029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366265
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362600
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368699
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 446 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380567
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380584
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380586
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 447 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415970
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415973
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BOGGS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11862 ROYAL TEE CIR
 City CAPE CORAL State FL Zip Code 33991-7513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 07 / 03 / 2016
Transaction ID : SA11A.344239
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 448 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOGGS, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11862 ROYAL TEE CIR

City CAPE CORAL	State FL	Zip Code 33991-7513
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403665

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BOGGS, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11862 ROYAL TEE CIR

City CAPE CORAL	State FL	Zip Code 33991-7513
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403726

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BOGHOSIAN, DEBORAH, A., MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 CORONET COURT

City SCHENECTADY	State NY	Zip Code 12309-1929
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELLIS HOSPITAL	Occupation (for Individual) MATASCP
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406708

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOGNAR, N, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 742 PINOAK ROAD
 City PITTSBURGH State PA Zip Code 15243-1153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOGS, DERALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10631 W 154TH PLACE
 City ORLAND PARK State IL Zip Code 60462-6033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368577
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOHLEN, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5729 SOUTH KENWOOD AVENUE
 City CHICAGO State IL Zip Code 60637-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A. D. KENWOOD COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417670
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 450 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOHLEN, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5729 SOUTH KENWOOD AVENUE
 City CHICAGO State IL Zip Code 60637-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A. D. KENWOOD COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417671
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BOHLEN, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5729 SOUTH KENWOOD AVENUE
 City CHICAGO State IL Zip Code 60637-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A. D. KENWOOD COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417686
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BOHLEN, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5729 SOUTH KENWOOD AVENUE
 City CHICAGO State IL Zip Code 60637-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A. D. KENWOOD COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417687
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 451 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLITHO, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SEQUOIA TRAIL
 City VERONA State WI Zip Code 53593-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DOT Occupation (for Individual) LTE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 793.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350610
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOLITHO, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SEQUOIA TRAIL
 City VERONA State WI Zip Code 53593-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DOT Occupation (for Individual) LTE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 793.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357676
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOLITHO, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SEQUOIA TRAIL
 City VERONA State WI Zip Code 53593-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DOT Occupation (for Individual) LTE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 793.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362164
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 452 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLITHO, JAMES, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3711 SEQUOIA TRAIL

City VERONA	State WI	Zip Code 53593-9639
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WISCONSIN DOT	Occupation (for Individual) LTE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
793.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365026

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BOLITHO, JAMES, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3711 SEQUOIA TRAIL

City VERONA	State WI	Zip Code 53593-9639
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WISCONSIN DOT	Occupation (for Individual) LTE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
793.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382789

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BOLITHO, JAMES, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3711 SEQUOIA TRAIL

City VERONA	State WI	Zip Code 53593-9639
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WISCONSIN DOT	Occupation (for Individual) LTE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
793.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387342

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 453 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLITHO, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SEQUOIA TRAIL
 City VERONA State WI Zip Code 53593-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DOT Occupation (for Individual) LTE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 793.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389166
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BOLITHO, JAMES, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 SEQUOIA TRAIL
 City VERONA State WI Zip Code 53593-9639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN DOT Occupation (for Individual) LTE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 793.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413130
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOLLING, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 HEMINGWAY CT. NW
 City LAWRENCEVILLE State GA Zip Code 30043-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353644
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 454 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLLING, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1635 HEMINGWAY CT. NW

City LAWRENCEVILLE	State GA	Zip Code 30043-3562
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353655

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BOLLING, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1635 HEMINGWAY CT. NW

City LAWRENCEVILLE	State GA	Zip Code 30043-3562
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383842

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BOLLING, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1635 HEMINGWAY CT. NW

City LAWRENCEVILLE	State GA	Zip Code 30043-3562
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408134

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 455 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLLING, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1635 HEMINGWAY CT. NW

City LAWRENCEVILLE	State GA	Zip Code 30043-3562
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408135

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BOLLING, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1635 HEMINGWAY CT. NW

City LAWRENCEVILLE	State GA	Zip Code 30043-3562
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419451

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BOLLMAN, PHYLLIS, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1500 LITTLE RAVEN 510

City DENVER	State CO	Zip Code 80202-6248
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.364188

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 456 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLLMAN, PHYLLIS, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LITTLE RAVEN
 510
 City DENVER State CO Zip Code 80202-6248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387977
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOLLMAN, PHYLLIS, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LITTLE RAVEN
 510
 City DENVER State CO Zip Code 80202-6248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387978
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391911
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

300.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 457 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 17 / 2016
Transaction ID : SA11A.400080
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405673
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DRIVE
 City SAN DIEGO State CA Zip Code 92116-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.420444
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 458 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLT, LELAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5155 CANTERBURY DRIVE

City SAN DIEGO	State CA	Zip Code 92116-2005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11A.420454

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BOLT, LELAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5155 CANTERBURY DRIVE

City SAN DIEGO	State CA	Zip Code 92116-2005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11A.420456

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BOLTON, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 FLYING R RANCH RD W

City SPRING BRANCH	State TX	Zip Code 78070-6106
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAF-T-BOX, LP	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.349923

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 459 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLTON, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 FLYING R RANCH RD W

City SPRING BRANCH	State TX	Zip Code 78070-6106
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAF-T-BOX, LP	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2016

Transaction ID : SA11A.376177

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BOLTON, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 FLYING R RANCH RD W

City SPRING BRANCH	State TX	Zip Code 78070-6106
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAF-T-BOX, LP	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400874

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BONAME, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4657 OLD LOONEY MILL ROAD

City BIRMINGHAM	State AL	Zip Code 35243-2640
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354912

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 460 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONAME, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4657 OLD LOONEY MILL ROAD

City BIRMINGHAM	State AL	Zip Code 35243-2640
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.406507

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. BOND, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15317 CHICHESTER LANE

City JERSEY VILLAGE	State TX	Zip Code 77040-1310
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389780

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BOND, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11391 WILSON MILLS ROAD

City CHARDON	State OH	Zip Code 44024-9408
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418470

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 461 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BOND, THOMAS, , ,
 Mailing Address 11391 WILSON MILLS ROAD
 City CHARDON State OH Zip Code 44024-9408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418471
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BOND, THOMAS, , ,
 Mailing Address 11391 WILSON MILLS ROAD
 City CHARDON State OH Zip Code 44024-9408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418485
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BONGAARDT, LINDNER, , ,
 Mailing Address 1016 FOREST LANE
 City GLEN MILLS State PA Zip Code 19342-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411503
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 462 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONGAARDT, LINDNER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1016 FOREST LANE

City GLEN MILLS	State PA	Zip Code 19342-9604
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411504

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BONIN, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 187 EDGEFIELD LANE

City STAUNTON	State VA	Zip Code 24401-6287
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HORSE BOARDING BUSINESS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355357

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BONIN, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 187 EDGEFIELD LANE

City STAUNTON	State VA	Zip Code 24401-6287
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HORSE BOARDING BUSINESS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363764

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 463 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364868
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372933
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380318
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 464 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.385668
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 06 / 2016
Transaction ID : SA11A.390381
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. BONIN, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 EDGEFIELD LANE
 City STAUNTON State VA Zip Code 24401-6287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BOARDING BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.398312
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 465 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONIN, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 187 EDGEFIELD LANE

City STAUNTON	State VA	Zip Code 24401-6287
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HORSE BOARDING BUSINESS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403797

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BONIN, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 187 EDGEFIELD LANE

City STAUNTON	State VA	Zip Code 24401-6287
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HORSE BOARDING BUSINESS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.408105

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BONNETT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15916 NE 7TH ST

City VANCOUVER	State WA	Zip Code 98684-8747
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASML	Occupation (for Individual) LITHO ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348937

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 466 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONNETT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15916 NE 7TH ST
 City VANCOUVER State WA Zip Code 98684-8747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASML Occupation (for Individual) LITHO ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372760
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BONNETT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15916 NE 7TH ST
 City VANCOUVER State WA Zip Code 98684-8747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASML Occupation (for Individual) LITHO ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399948
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BONNER, STEPHEN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 N. DAYTON ST
 City CHICAGO State IL Zip Code 60614-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/EXECUTIVE/ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397953
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 467 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONNER, STEPHEN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 N. DAYTON ST
 City CHICAGO State IL Zip Code 60614-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/EXECUTIVE/ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397956
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S
 City WALTON State IN Zip Code 46994-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344462
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

C. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S
 City WALTON State IN Zip Code 46994-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.369174
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	307.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 468 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375803

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380509

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S

City WALTON	State IN	Zip Code 46994-9228
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388236

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 469 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S
 City WALTON State IN Zip Code 46994-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404964
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S
 City WALTON State IN Zip Code 46994-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404972
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S
 City WALTON State IN Zip Code 46994-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408300
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 470 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BONSETT, DOTTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 E CR 900 S
 City WALTON State IN Zip Code 46994-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413858
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BOONE, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4123 SPRING ISLAND
 City OKATIE State SC Zip Code 29909-4041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414744
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BOOTH, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7585 BRIDGEGATE COURT
 City ATLANTA State GA Zip Code 30350-4604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAUDIA M BOOTH Occupation (for Individual) DIRECTOR OF NURSING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372280
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 471 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOOTH, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7585 BRIDGEGATE COURT
 City ATLANTA State GA Zip Code 30350-4604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAUDIA M BOOTH Occupation (for Individual) DIRECTOR OF NURSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399979
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BOOTH, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7585 BRIDGEGATE COURT
 City ATLANTA State GA Zip Code 30350-4604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAUDIA M BOOTH Occupation (for Individual) DIRECTOR OF NURSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406303
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BOOTH, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 26006
 City CHARLOTTE State NC Zip Code 28221-6006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369466
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 472 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORGHESE, FRANCESCO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 705 OCEAN CLUB PLACE

City FERNANDINA BEACH	State FL	Zip Code 32034-6565
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2016

Transaction ID : SA11A.349053

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BORGHESE, FRANCESCO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 705 OCEAN CLUB PLACE

City FERNANDINA BEACH	State FL	Zip Code 32034-6565
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.376840

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BORGHESE, FRANCESCO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 705 OCEAN CLUB PLACE

City FERNANDINA BEACH	State FL	Zip Code 32034-6565
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.377130

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 473 OF 5722
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORGMEIER, JULIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12432 W EVENINGSIDE DRIVE
 City SUN CITY WEST State AZ Zip Code 85375-1938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361147
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BORKOWSKI, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 627 E HOBCAW DRIVE
 City MOUNT PLEASANT State SC Zip Code 29464-2548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345196
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BORRA, PIER, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 854
 City HARBOR SPRINGS State MI Zip Code 49740-0854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358752
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 474 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORSUK, SHERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 PARKER AVENUE
 City MERIDEN State CT Zip Code 06450-5924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358291
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BORSUK, SHERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 PARKER AVENUE
 City MERIDEN State CT Zip Code 06450-5924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370796
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BORSUK, SHERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 PARKER AVENUE
 City MERIDEN State CT Zip Code 06450-5924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.404609
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 475 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BORSUK, SHERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 PARKER AVENUE
 City MERIDEN State CT Zip Code 06450-5924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408265
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BORTZ, NEIL, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 SAINT PAUL PLACE
 City CINCINNATI State OH Zip Code 45202-6042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOWNE PROPERTIES Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357905
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BORYNACK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 WORTH AVENUE PH
 City PALM BEACH State FL Zip Code 33480-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALLY FINDLAYGALLERIES INT'L Occupation (for Individual) ART DEALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410422
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOS, MARY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7851 WEDGWOOD COURT
 City DEMOTTE State IN Zip Code 46310-9554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370559
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BOSANKO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13224 PIEDMONT VISTA DRIVE
 City HAYMARKET State VA Zip Code 20169-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICAROS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352477
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOSANKO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13224 PIEDMONT VISTA DRIVE
 City HAYMARKET State VA Zip Code 20169-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICAROS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375915
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 477 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BOSANKO, THOMAS, , ,

Mailing Address 13224 PIEDMONT VISTA DRIVE

City HAYMARKET State VA Zip Code 20169-2645

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICAROS, INC. Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016

Transaction ID : SA11A.401512

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BOSSE, JEFFREY, , ,

Mailing Address 1211 GULF OF MEXICO DRIVE, APT 957

City LONGBOAT KEY State FL Zip Code 34228-3654

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016

Transaction ID : SA11A.391615

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BOSTIC, ROBERT, , ,

Mailing Address 742 GOLF DR

City VENICE State FL Zip Code 34285-3208

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPATLANTIC Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11A.386771

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 478 OF 5722
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOSTWICK, JULIE, M., ,

Mailing Address **5819 N VISTA LANE**

City SPOKANE	State WA	Zip Code 99212-1680
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
08 / 11 / 2016

Transaction ID : SA11A.364361

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOSTWICK, JULIE, M., ,

Mailing Address **5819 N VISTA LANE**

City SPOKANE	State WA	Zip Code 99212-1680
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.379692

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOSTWICK, JULIE, M., ,

Mailing Address **5819 N VISTA LANE**

City SPOKANE	State WA	Zip Code 99212-1680
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
09 / 16 / 2016

Transaction ID : SA11A.396191

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 479 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOSTWICK, JULIE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5819 N VISTA LANE
 City SPOKANE State WA Zip Code 99212-1680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417237
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. BOTCHER, SANDRA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10260 N RANGE LINE CT
 City MEQUON State WI Zip Code 53092-5346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391353
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. BOTHE, KENT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7410 1ST AVE.
 City KENOSHA State WI Zip Code 53143-5562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOTHE ASSOCIATES, INC. Occupation (for Individual) PROCESS PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349460
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3040.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 480 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOTHE, KENT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7410 1ST AVE.
City KENOSHA State WI Zip Code 53143-5562
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BOTHE ASSOCIATES, INC. Occupation (for Individual) PROCESS PLANNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352113
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOTHE, KENT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7410 1ST AVE.
City KENOSHA State WI Zip Code 53143-5562
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BOTHE ASSOCIATES, INC. Occupation (for Individual) PROCESS PLANNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419218
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOULTER, BEAU, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6932 FAIRFAX DR STE 204
City ARLINGTON State VA Zip Code 22213-1030
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BEAU BOULTER LLC Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391357
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 481 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOURELL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 GAY STREET
 City WESTWOOD State MA Zip Code 02090-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397297
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. BOURGOIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 889 ROBB RD
 City PALO ALTO State CA Zip Code 94306-3730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349670
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BOUTON, KARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ROYAL OAKS DRIVE
 City MONROVIA State CA Zip Code 91016-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLAN COMPANY Occupation (for Individual) REAL ESTATE MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 286.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349360
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	809.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 482 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOUTON, KARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 929 ROYAL OAKS DRIVE

City MONROVIA	State CA	Zip Code 91016-3755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLAN COMPANY	Occupation (for Individual) REAL ESTATE MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11A.357222

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. BOUTON, KARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 929 ROYAL OAKS DRIVE

City MONROVIA	State CA	Zip Code 91016-3755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLAN COMPANY	Occupation (for Individual) REAL ESTATE MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11A.357223

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. BOUTON, KARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 929 ROYAL OAKS DRIVE

City MONROVIA	State CA	Zip Code 91016-3755
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLAN COMPANY	Occupation (for Individual) REAL ESTATE MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11A.422339

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	143.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 483 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOUTON, KARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 ROYAL OAKS DRIVE
 City MONROVIA State CA Zip Code 91016-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLAN COMPANY Occupation (for Individual) REAL ESTATE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422348
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BOWDEN, OTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 428 BEACHSIDE PLACE
 City AMELIA ISLAND State FL Zip Code 32034-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419682
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOWEN, CASSANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 N COUNTRY CLUB DRIVE
 City OKLAHOMA CITY State OK Zip Code 73116-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380966
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1275.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 484 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWEN, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 OLD COLONY ROAD

City EASTFORD	State CT	Zip Code 06242-9456
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EASTFORD FIRE & RESCUE SALES, INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
844.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385602

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BOWEN, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 BIRCH RD

City SHELBURNE	State VT	Zip Code 05482-6893
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356268

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

C. BOWEN, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 BIRCH RD

City SHELBURNE	State VT	Zip Code 05482-6893
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362456

Amount of Each Receipt this Period
108.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 485 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWEN, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 BIRCH RD

City SHELBURNE	State VT	Zip Code 05482-6893
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 27 / 2016

Transaction ID : SA11A.383107

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

B. BOWEN, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 BIRCH RD

City SHELBURNE	State VT	Zip Code 05482-6893
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11A.399537

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BOWEN, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 BIRCH RD

City SHELBURNE	State VT	Zip Code 05482-6893
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 27 / 2016

Transaction ID : SA11A.411289

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	104.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 486 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 BIRCH RD
 City SHELBURNE State VT Zip Code 05482-6893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415912
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BOWERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 390283
 City EDINA State MN Zip Code 55439-0283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FINANCIAL RECOVERY SERVICES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370520
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BOWLER, BARBARA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3532 LIME TREE COURT
 City WALNUT CREEK State CA Zip Code 94598-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379607
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 487 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWLER, BARBARA, J., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3532 LIME TREE COURT

City WALNUT CREEK	State CA	Zip Code 94598-2724
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406696

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. BOWLIN, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 JUMENTO CAY LANE

City BONITA SPRINGS	State FL	Zip Code 34134-8504
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.401629

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. BOWLIN, BLEVINS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10717 SAINT LEGER CIRCLE

City UNION	State KY	Zip Code 41091-7972
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIMELINE UTILITY SERVICES	Occupation (for Individual) SENIOR MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350382

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	875.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 488 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWLIN, MIKE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4800 ZION HILL ROAD

City WEATHERFORD	State TX	Zip Code 76088-7453
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CATTLE RANCHER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2016

Transaction ID : SA11A.345829

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. BOWMAN, ANN, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 89425 BARK POINT ROAD

City HERBSTER	State WI	Zip Code 54844-4450
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359267

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BOWMAN, ANN, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 89425 BARK POINT ROAD

City HERBSTER	State WI	Zip Code 54844-4450
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359268

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 489 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWMAN, ANN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89425 BARK POINT ROAD
 City HERBSTER State WI Zip Code 54844-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388114
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOWMAN, ANN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89425 BARK POINT ROAD
 City HERBSTER State WI Zip Code 54844-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.404350
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BOWMAN, ANN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89425 BARK POINT ROAD
 City HERBSTER State WI Zip Code 54844-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt **09 / 24 / 2016**
Transaction ID : SA11A.408765
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 490 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWMAN, ANN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89425 BARK POINT ROAD
 City HERBSTER State WI Zip Code 54844-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419746
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3437
 City PONTE VEDRA BEACH State FL Zip Code 32004-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349319
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3437
 City PONTE VEDRA BEACH State FL Zip Code 32004-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366738
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 491 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3437
 City PONTE VEDRA BEACH State FL Zip Code 32004-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385925
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3437
 City PONTE VEDRA BEACH State FL Zip Code 32004-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397581
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3437
 City PONTE VEDRA BEACH State FL Zip Code 32004-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403434
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 492 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 3437**

City **PONTE VEDRA BEACH** State **FL** Zip Code **32004-3437**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : **SA11A.417681**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

B. BOYCE, DICK, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **420 CERVANTES**

City **PORTOLA VALLEY** State **CA** Zip Code **94028-7620**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **TPG CAPITAL** Occupation (for Individual) **INVESTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **175000.00**

Date of Receipt **09 / 08 / 2016**
Transaction ID : **SA11A.391355**

Amount of Each Receipt this Period **50000.00**

Memo Item CONTRIBUTION

C. BOYCE, LUCAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4177 N ORANGE BLOSSOM TRAIL UNIT 6**

City **ORLANDO** State **FL** Zip Code **32804-2792**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : **SA11A.357811**

Amount of Each Receipt this Period **210.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **50260.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 493 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYD, MCGUIRE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6303 TOWANA ROAD
 City RICHMOND State VA Zip Code 23226-3125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357969
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOYD, MCGUIRE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6303 TOWANA ROAD
 City RICHMOND State VA Zip Code 23226-3125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378242
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOYD, MCGUIRE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6303 TOWANA ROAD
 City RICHMOND State VA Zip Code 23226-3125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411853
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 494 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYD, RANDAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2704 ALLEE DE PAPILLON
 City KNOXVILLE State TN Zip Code 37922-6560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF TN Occupation (for Individual) COMMISSIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11A.346087
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. BOYDSTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1356 W COWLES STREET
 City LONG BEACH State CA Zip Code 90813-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALE PLACE INC Occupation (for Individual) SCALE TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381388
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOYER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 NEW HAMPSHIRE 3J
 City LAWRENCE State KS Zip Code 66044-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROSOCO INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.369169
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	51250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 495 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYER, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 NW GRAND BLVD
 City OKLAHOMA CITY State OK Zip Code 73116-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390860
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOYER, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 NW GRAND BLVD
 City OKLAHOMA CITY State OK Zip Code 73116-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396771
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOYER, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 NW GRAND BLVD
 City OKLAHOMA CITY State OK Zip Code 73116-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404668
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 496 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYER, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 NW GRAND BLVD
 City OKLAHOMA CITY State OK Zip Code 73116-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410882
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOYLE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13221 N WINDSOR CT
 City MEQUON State WI Zip Code 53097-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.363243
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BOYLE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2228 SW 21ST AVE
 City PORTLAND State OR Zip Code 97201-2359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLUMBIA SPORTSWEAR Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391330
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION
 REFUNDED \$5,000.00 ON 09/15/2016

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 497 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYLE, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2228 SW 21ST AVE

City PORTLAND	State OR	Zip Code 97201-2359
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLUMBIA SPORTSWEAR	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.395816

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. BOYLE, SUSAN, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 PIONEER DRIVE

City DENTON	State TX	Zip Code 76210-1212
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374471

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BOYLE, SUSAN, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 PIONEER DRIVE

City DENTON	State TX	Zip Code 76210-1212
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385599

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOYLE, SUSAN, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 PIONEER DRIVE
 City DENTON State TX Zip Code 76210-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402747
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOYLE, SUSAN, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 PIONEER DRIVE
 City DENTON State TX Zip Code 76210-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404438
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BOYLE, TIMOTHY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8307
 City PORTLAND State OR Zip Code 97207-8307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COULBIA SPORTSWEAR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367889
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 25100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 499 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRACAMONTES, FRANCISCO, , ,

Mailing Address **1200 E SAVANNAH AVE STE 20**

City MCALLEN	State TX	Zip Code 78503-1728
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANCISCO BRACAMONTES	Occupation (for Individual) PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416459

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRACAMONTES, FRANCISCO, , ,

Mailing Address **1200 E SAVANNAH AVE STE 20**

City MCALLEN	State TX	Zip Code 78503-1728
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANCISCO BRACAMONTES	Occupation (for Individual) PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416460

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRACAMONTES, FRANCISCO, , ,

Mailing Address **1200 E SAVANNAH AVE STE 20**

City MCALLEN	State TX	Zip Code 78503-1728
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANCISCO BRACAMONTES	Occupation (for Individual) PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416462

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKEN, BARTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 NW 71ST
 City OKC State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1492.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348799
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRACKEN, BARTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 NW 71ST
 City OKC State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1492.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348817
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRACKEN, BARTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 NW 71ST
 City OKC State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1492.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 501 OF 5722
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKEN, BARTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 NW 71ST
 City OKC State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1492.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377437
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BRACKEN, BARTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 NW 71ST
 City OKC State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1492.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.401003
 Amount of Each Receipt this Period
 42.00
 Memo Item
 CONTRIBUTION

C. BRACKEN, BARTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 NW 71ST
 City OKC State OK Zip Code 73116-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1492.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409488
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 542.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 502 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.379088
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387181
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398890
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409112
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRACKEN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 TYNE BLVD
 City NASHVILLE State TN Zip Code 37220-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413852
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRACKER, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7564 SWEETWATER LANE
 City HIGHLAND State CA Zip Code 92346-3976
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LLUMC Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374924
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 504 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACKER, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7564 SWEETWATER LANE

City HIGHLAND	State CA	Zip Code 92346-3976
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LLUMC	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387990

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BRACKER, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7564 SWEETWATER LANE

City HIGHLAND	State CA	Zip Code 92346-3976
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LLUMC	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411413

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BRACY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29555 PORPOISE CREEK ROAD

City TRAPPE	State MD	Zip Code 21673-1716
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409455

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 505 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADBURN, BRUCE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4536 POLO LANE
 City ATLANTA State GA Zip Code 30339-5344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BRADBURN CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406711
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. BRADBURY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2244 E OJAI AVENUE
 City OJAI State CA Zip Code 93023-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389565
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. BRADFORD, JOSEPH, U., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4946 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344363
 Amount of Each Receipt this Period 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	559.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 506 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADFORD, JOSEPH, U., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4946 RIO VERDE DRIVE

City SAN JOSE	State CA	Zip Code 95118-2335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : SA11A.344364

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

B. BRADFORD, JOSEPH, U., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4946 RIO VERDE DRIVE

City SAN JOSE	State CA	Zip Code 95118-2335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384111

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BRADFORD, JOSEPH, U., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4946 RIO VERDE DRIVE

City SAN JOSE	State CA	Zip Code 95118-2335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.419500

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 507 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349698
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350895
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372400
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 508 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386273
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 09 / 18 / 2016
Transaction ID : SA11A.399880
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412497
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 509 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, BETTYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 EAST 54TH STREET
 4G
 City NEW YORK State NY Zip Code 10022-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412498
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRADLEY, KIRK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9
 City SANFORD State NC Zip Code 27331-0009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE MOORE CAPITAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379111
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. BRADLEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 531 E ZERMATT CT
 City JANESVILLE State WI Zip Code 53545-8345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VALMET Occupation (for Individual) SERVICE TECH SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355765
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 510 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BRADLEY, PETER, , ,		Date of Receipt MM / DD / YYYY 08 / 26 / 2016
Mailing Address 531 E ZERMATT CT		Transaction ID : SA11A.380728
City JANESVILLE	State WI	Zip Code 53545-8345
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) VALMET	Occupation (for Individual) SERVICE TECH SPECIALIST	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BRADLEY, PETER, , ,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016
Mailing Address 531 E ZERMATT CT		Transaction ID : SA11A.408008
City JANESVILLE	State WI	Zip Code 53545-8345
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) VALMET	Occupation (for Individual) SERVICE TECH SPECIALIST	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BRADLEY, SUE, , ,		Date of Receipt MM / DD / YYYY 07 / 30 / 2016
Mailing Address 8764 E VIA DE VIVA		Transaction ID : SA11A.359953
City SCOTTSDALE	State AZ	Zip Code 85258-4033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 511 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8764 E VIA DE VIVA
 City SCOTTSDALE State AZ Zip Code 85258-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384792
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BRADLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 W 20TH AVE
 City SPOKANE State WA Zip Code 99203-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363771
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. BRADLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 W 20TH AVE
 City SPOKANE State WA Zip Code 99203-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374618
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 512 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 W 20TH AVE
 City SPOKANE State WA Zip Code 99203-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386222
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BRADLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 W 20TH AVE
 City SPOKANE State WA Zip Code 99203-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402721
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRADLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 W 20TH AVE
 City SPOKANE State WA Zip Code 99203-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420003
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 513 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADSHAW, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 E LONE PEAK DRIVE
 City ALPINE State UT Zip Code 84004-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350678
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRADSHAW, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 E LONE PEAK DRIVE
 City ALPINE State UT Zip Code 84004-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378647
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRADSHAW, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 E LONE PEAK DRIVE
 City ALPINE State UT Zip Code 84004-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.411242
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 514 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADSHAW, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 E LONE PEAK DRIVE
 City ALPINE State UT Zip Code 84004-1962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414158
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRADWAY, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1151 HIDDEN VALLEY RD
 City THOUSAND OAKS State CA Zip Code 91361-5046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMGEN INC. Occupation (for Individual) CHARIMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391345
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348460
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 515 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357166
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364735
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364736
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	73.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 516 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364738
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366802
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368321
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 517 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380327
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391101
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396927
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 518 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409355
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410068
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRADY, ANN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10026 HAMPSHIRE DR.
 City HUNTSVILLE State AL Zip Code 35803-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420021
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 519 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8314 HIGH CLIFF DRIVE
 City FAIR OAKS RANCH State TX Zip Code 78015-4233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349176
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRADY, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8314 HIGH CLIFF DRIVE
 City FAIR OAKS RANCH State TX Zip Code 78015-4233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374657
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRADY, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8314 HIGH CLIFF DRIVE
 City FAIR OAKS RANCH State TX Zip Code 78015-4233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399681
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 520 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADY, JEAN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1827 FARR WEST DRIVE
 City OGDEN State UT Zip Code 84404-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389841
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. BRADY, WILLIAM, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1466
 City CARTHAGE State NC Zip Code 28327-1466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360060
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BRADY, WILLIAM, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1466
 City CARTHAGE State NC Zip Code 28327-1466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379469
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 521 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAKE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 S LAKESIDE AVE, #353
 APT 353
 City LAKELAND State FL Zip Code 33803-1048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413250
 Amount of Each Receipt this Period
 114.00
 Memo Item
 CONTRIBUTION

B. BRAKE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 S LAKESIDE AVE, #353
 APT 353
 City LAKELAND State FL Zip Code 33803-1048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422181
 Amount of Each Receipt this Period
 228.00
 Memo Item
 CONTRIBUTION

C. BRAKE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 S LAKESIDE AVE, #353
 APT 353
 City LAKELAND State FL Zip Code 33803-1048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422186
 Amount of Each Receipt this Period
 228.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	570.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 522 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMBLE, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1287

City HASTINGS State NE Zip Code 68902-1287

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MID-AMERICA PUMP & SUPPLY INC. Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402544

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. BRAMER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1911 CREEKWOOD DR.

City SOUTH BEND State IN Zip Code 46635-2055

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348444

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. BRAMER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1911 CREEKWOOD DR.

City SOUTH BEND State IN Zip Code 46635-2055

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387516

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 523 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387517
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400303
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BRAMER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1911 CREEKWOOD DR.
 City SOUTH BEND State IN Zip Code 46635-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416466
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 524 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMER, LEETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.388117

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. BRAMER, LEETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2016

Transaction ID : SA11A.404354

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. BRAMER, LEETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
404.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.405755

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 525 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BRAMER, LEETA, , ,

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.410087

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BRAMER, LEETA, , ,

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417701

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BRAMER, LEETA, , ,

Mailing Address 107 WEST STREET
P.O. BOX 244

City PLAINVIEW State NE Zip Code 68769-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
404.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417705

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 526 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMHALL, GEOFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 PARKWAY RD
 City BRONXVILLE State NY Zip Code 10708-3603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SECURITIES SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352453
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRAMHALL, GEOFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 PARKWAY RD
 City BRONXVILLE State NY Zip Code 10708-3603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SECURITIES SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRAMHALL, GEOFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 PARKWAY RD
 City BRONXVILLE State NY Zip Code 10708-3603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SECURITIES SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401387
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 527 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMHALL, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9644 DEER RUN DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358324
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRAMHALL, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9644 DEER RUN DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382432
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRAMHALL, JACQUES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9644 DEER RUN DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416120
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 528 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMLETT, ROBERT, M., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 369

City ARDMORE	State OK	Zip Code 73402-0369
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS POINTE ADVISORS, LLC	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348932

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BRAMLETT, ROBERT, M., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 369

City ARDMORE	State OK	Zip Code 73402-0369
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS POINTE ADVISORS, LLC	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407596

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BRAMLETT, ROBERT, M., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 369

City ARDMORE	State OK	Zip Code 73402-0369
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS POINTE ADVISORS, LLC	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407597

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 529 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAMLETT, ROBERT, M., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 369

City ARDMORE State OK Zip Code 73402-0369

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSS POINTE ADVISORS, LLC Occupation (for Individual) INDEPENDENT INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407601

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. BRAMSON, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 PARK AVENUE APT 28 B

City NEW YORK State NY Zip Code 10022-1629

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377133

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

C. BRAMSEN, JAMES, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 RIDGE ROAD

City BARRINGTON State IL Zip Code 60010-9681

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPRAYING SYSTEMS Occupation (for Individual) CEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 10800.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365268

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 530 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANCH, ROBERT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 CHURCH ROAD
 City WALLS State MS Zip Code 38680-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358793
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRANCH, ROBERT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 CHURCH ROAD
 City WALLS State MS Zip Code 38680-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417253
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRANDALEONE, BRUCE, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6040 OLD FIELD DRIVE
 City CHAPEL HILL State NC Zip Code 27514-8234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358626
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 531 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDALEONE, BRUCE, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6040 OLD FIELD DRIVE

City CHAPEL HILL	State NC	Zip Code 27514-8234
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2016

Transaction ID : SA11A.370987

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. BRANDALEONE, BRUCE, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6040 OLD FIELD DRIVE

City CHAPEL HILL	State NC	Zip Code 27514-8234
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : SA11A.392845

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BRANDELL, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2575 HICKORY HEIGHTS CT.

City MILFORD	State MI	Zip Code 48381-3279
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICHARD I. LIPPITT, PC	Occupation (for Individual) LEGAL ASSISTANT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SA11A.368996

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 532 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDELL, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2575 HICKORY HEIGHTS CT.
 City MILFORD State MI Zip Code 48381-3279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD I. LIPPITT, PC Occupation (for Individual) LEGAL ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402895
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRANDELL, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2575 HICKORY HEIGHTS CT.
 City MILFORD State MI Zip Code 48381-3279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD I. LIPPITT, PC Occupation (for Individual) LEGAL ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRANDENBURG, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14424 AMERICAN KESTREL DR.
 City AUSTIN State TX Zip Code 78738-6520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402755
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 533 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDENBURG, JIMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14424 AMERICAN KESTREL DR.

City AUSTIN	State TX	Zip Code 78738-6520
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417610

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BRANDOW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 EAST 86TH STREET
2A

City NEW YORK	State NY	Zip Code 10028-7534
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS POLK & WARDWELL LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.350563

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. BRAND, RANDOLF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2975 VAN HORN ROAD

City FAIRBANKS	State AK	Zip Code 99709-5418
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.390414

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 534 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 5TH STREET
 City MANHATTAN BEACH State CA Zip Code 90266-6001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.374065
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BRANDOW, ROBERT, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 BRANDOW LANE
 City BUXTON State ME Zip Code 04093-3852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.377026
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. BRANDT, SHAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 SPINNAKER DRIVE
 City ANCHORAGE State AK Zip Code 99516-3433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353557
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 535 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDLI, WILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26702 COUNTY ROAD 5
 City WARROAD State MN Zip Code 56763-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.396140
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRANDLI, WILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26702 COUNTY ROAD 5
 City WARROAD State MN Zip Code 56763-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.414696
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRANNON, CHUCK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 E 86TH ST #34 #34
 City NEW YORK State NY Zip Code 10028-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEM-AMERICA, INC. Occupation (for Individual) COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368882
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 536 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANNON, CHUCK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 E 86TH ST #34 #34
 City NEW YORK State NY Zip Code 10028-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEM-AMERICA, INC. Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398143
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. BRANNON, CHUCK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 E 86TH ST #34 #34
 City NEW YORK State NY Zip Code 10028-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEM-AMERICA, INC. Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410652
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. BRANNON, CHUCK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 E 86TH ST #34 #34
 City NEW YORK State NY Zip Code 10028-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEM-AMERICA, INC. Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410660
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 537 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANNAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POB 10250

City TORRANCE State CA Zip Code 90505-1150

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.372983

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BRANNIN, RICHARD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1314 GRAYNOLD AVE.

City GLENDALE State CA Zip Code 91202-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : SA11A.357632

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BRANNIN, RICHARD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1314 GRAYNOLD AVE.

City GLENDALE State CA Zip Code 91202-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016

Transaction ID : SA11A.382728

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 538 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANNIN, RICHARD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 GRAYNOLD AVE.
 City GLENDALE State CA Zip Code 91202-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413011
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRASHER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 LAKELAND DRIVE
 City PALOS PARK State IL Zip Code 60464-2538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROFESSIONAL STRATEGY GROUP, LLC Occupation (for Individual) SELF-EMPLOYED CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409765
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349602
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 539 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355652
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359541
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386740
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 540 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.387489
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388152
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRASIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4860 LONE OAK CT
 City ANN ARBOR State MI Zip Code 48108-8575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399527
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 541 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRASIE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4860 LONE OAK CT

City ANN ARBOR	State MI	Zip Code 48108-8575
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.403910

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BRASWELL, CRUSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1074 ROSEDALE ROAD

City ATLANTA	State GA	Zip Code 30306-2520
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SA11A.379764

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. BRAUER, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11250 HUNTER DR

City BRIDGETON	State MO	Zip Code 63044-2306
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTER ENGINEERING COMPANY	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
27500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2016

Transaction ID : SA11A.358849

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 542 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAUER, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11250 HUNTER DR

City BRIDGETON	State MO	Zip Code 63044-2306
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTER ENGINEERING COMPANY	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.393901

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

IN-KIND: JFC EVENT ENTERTAINMENT & SUPPLIES

B. BRAWLEY, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22010 N PEDREGOSA DR

City SUN CITY WEST	State AZ	Zip Code 85375-2692
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GERALD BRAWLEY	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358289

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BRAWLEY, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22010 N PEDREGOSA DR

City SUN CITY WEST	State AZ	Zip Code 85375-2692
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GERALD BRAWLEY	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379877

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 543 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAWLEY, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22010 N PEDREGOSA DR
 City SUN CITY WEST State AZ Zip Code 85375-2692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GERALD BRAWLEY Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403740
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRAWLEY, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22010 N PEDREGOSA DR
 City SUN CITY WEST State AZ Zip Code 85375-2692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GERALD BRAWLEY Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410564
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRAXTON, LAMAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6415 GREENLAND ROA
 City JACKSONVILLE State FL Zip Code 32258-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORTEGA INDUSTRIAL CONTRACTORS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392605
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 544 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAY, RICHARD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 323 S HENDERSON STREET
City VIRDEN State IL Zip Code 62690-1679
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.355215
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRAY, RICHARD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 323 S HENDERSON STREET
City VIRDEN State IL Zip Code 62690-1679
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407169
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BRAYER, THEODORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 N. ARLINGTON AVE 17 E 17 E
City RENO State NV Zip Code 89501-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.366973
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 545 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016
Transaction ID : SA11A.351050

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

B. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016
Transaction ID : SA11A.351081

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016
Transaction ID : SA11A.384538

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	68.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 546 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384545

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397618

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397621

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 547 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419779

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. BRAZAS, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 767

City VALLE CRUCIS	State NC	Zip Code 28691-0767
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419780

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. BRAZELL, LORENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 994 N 1750 ROAD

City LAWRENCE	State KS	Zip Code 66049-9018
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392876

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 548 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREault, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 880 W SUNSET DR

City REDLANDS	State CA	Zip Code 92373-6938
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.393985

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BREED, ALAN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 ROCKRIDGE AVE

City GREENWICH	State CT	Zip Code 06831-4441
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDGEWOOD MANAGEMENT	Occupation (for Individual) INVESTMENT MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391366

Amount of Each Receipt this Period
41000.00

Memo Item
CONTRIBUTION

C. BREEN, PAUL, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 WOODMAN DRIVE

City COLUMBUS	State OH	Zip Code 43085-2965
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEALTHSTONE, INC.	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
359.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349318

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	41300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 549 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREEN, PAUL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 WOODMAN DRIVE
 City COLUMBUS State OH Zip Code 43085-2965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTHSTONE, INC. Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362393
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. BREEN, PAUL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 WOODMAN DRIVE
 City COLUMBUS State OH Zip Code 43085-2965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTHSTONE, INC. Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402547
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. BREEN, PAUL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 WOODMAN DRIVE
 City COLUMBUS State OH Zip Code 43085-2965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTHSTONE, INC. Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402704
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 550 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREEN, PAUL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 WOODMAN DRIVE
 City COLUMBUS State OH Zip Code 43085-2965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTHSTONE, INC. Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408389
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. BREITNER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PINE DR. N.
 City ROSLYN State NY Zip Code 11576-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349032
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. BREITNER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PINE DR. N.
 City ROSLYN State NY Zip Code 11576-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.354034
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 551 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREITNER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PINE DR. N.
 City ROSLYN State NY Zip Code 11576-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355275
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BREITNER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PINE DR. N.
 City ROSLYN State NY Zip Code 11576-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355282
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BREITNER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PINE DR. N.
 City ROSLYN State NY Zip Code 11576-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356262
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	127.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 552 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREITNER, EDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 PINE DR. N.

City ROSLYN	State NY	Zip Code 11576-2037
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362225

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BREITNER, EDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 PINE DR. N.

City ROSLYN	State NY	Zip Code 11576-2037
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.383067

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

C. BREITNER, EDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 PINE DR. N.

City ROSLYN	State NY	Zip Code 11576-2037
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394419

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	77.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 553 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BREITNER, EDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 22 PINE DR. N.
City ROSLYN State NY Zip Code 11576-2037
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 333.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403700
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BREITNER, EDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 22 PINE DR. N.
City ROSLYN State NY Zip Code 11576-2037
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 333.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411272
Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

C. BREM, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 109 JOYCE ROAD
City FRAMINGHAM State MA Zip Code 01701-3365
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417196
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 302.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 554 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRENNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 N ACTON PLACE
 City ANNAPOLIS State MD Zip Code 21401-2714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379479
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BRENNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 N ACTON PLACE
 City ANNAPOLIS State MD Zip Code 21401-2714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.396962
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRENNAN, ROSEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 DUNDEE
 City WILLIAMSBURG State VA Zip Code 23188-9118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **07 / 07 / 2016**
Transaction ID : SA11A.345795
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	480.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 555 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BRENNAN, ROSEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 DUNDEE

City WILLIAMSBURG	State VA	Zip Code 23188-9118
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2016

Transaction ID : SA11A.354677

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BRENNAN, ROSEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 DUNDEE

City WILLIAMSBURG	State VA	Zip Code 23188-9118
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.377426

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BRENNAN, ROSEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 DUNDEE

City WILLIAMSBURG	State VA	Zip Code 23188-9118
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409487

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 556 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BRETT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 BRETT RIDGE ROAD
 City LAUREL State MS Zip Code 39443-0750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378168
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BREWER, EZMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 122ND AVENUE SE
 City BELLEVUE State WA Zip Code 98005-4626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.347780
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BREWER, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 RUE CHAMONIX
 City NEWPORT BEACH State CA Zip Code 92660-5902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.360918
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 557 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BREWER, MICHAEL, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4440 SW 75TH AVE

City PORTLAND	State OR	Zip Code 97225-2103
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.367939

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. BREWSTER, GEOFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6453 E STALLION ROAD

City PARADISE VALLEY	State AZ	Zip Code 85253-3151
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.389525

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

C. BRIDGES, CLIFTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6970 SUNNYSIDE DR

City LEESBURG	State FL	Zip Code 34748-9556
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386381

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 558 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIDGES, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 SUNNYSIDE DR
 City LEESBURG State FL Zip Code 34748-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405955
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BRIDGES, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 SUNNYSIDE DR
 City LEESBURG State FL Zip Code 34748-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405980
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRIDGES, EDSON, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10725 CEDAR STREET
 City OMAHA State NE Zip Code 68124-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIDGES INVESTMENT COUNSEL Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365181
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 559 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRIDLEMAN, MARY, , ,

Mailing Address **9 CLIPPER RD**

City RANCHO PALOS VERDE	State CA	Zip Code 90275-5923
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.349562

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRIDLEMAN, MARY, , ,

Mailing Address **9 CLIPPER RD**

City RANCHO PALOS VERDE	State CA	Zip Code 90275-5923
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2016

Transaction ID : SA11A.358362

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRIDLEMAN, MARY, , ,

Mailing Address **9 CLIPPER RD**

City RANCHO PALOS VERDE	State CA	Zip Code 90275-5923
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2016

Transaction ID : SA11A.359724

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 560 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BRIDLEMAN, MARY, , ,
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365107
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BRIDLEMAN, MARY, , ,
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366783
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BRIDLEMAN, MARY, , ,
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372624
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 561 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRIDLEMAN, MARY, , ,

Mailing Address **9 CLIPPER RD**

City RANCHO PALOS VERDE	State CA	Zip Code 90275-5923
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2016

Transaction ID : SA11A.379036

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRIDLEMAN, MARY, , ,

Mailing Address **9 CLIPPER RD**

City RANCHO PALOS VERDE	State CA	Zip Code 90275-5923
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2016

Transaction ID : SA11A.384591

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRIDLEMAN, MARY, , ,

Mailing Address **9 CLIPPER RD**

City RANCHO PALOS VERDE	State CA	Zip Code 90275-5923
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2016

Transaction ID : SA11A.394319

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 562 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIDLEMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401164
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BRIDLEMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CLIPPER RD
 City RANCHO PALOS VERDE State CA Zip Code 90275-5923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408641
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BRIGGS, BLAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1969 LANCEWOOD LANE
 City CARLSBAD State CA Zip Code 92009-6826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.391613
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 563 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGGAMAN, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 REDBUD RD
 City CHAPEL HILL State NC Zip Code 27514-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368299
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRIGGAMAN, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 REDBUD RD
 City CHAPEL HILL State NC Zip Code 27514-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.387227
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRIGGAMAN, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 REDBUD RD
 City CHAPEL HILL State NC Zip Code 27514-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390347
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 564 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGGAMAN, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 REDBUD RD
 City CHAPEL HILL State NC Zip Code 27514-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398935
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRIGGAMAN, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 REDBUD RD
 City CHAPEL HILL State NC Zip Code 27514-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407793
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BRIGGS, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 W 23RD AVENUE
 City EUGENE State OR Zip Code 97405-2871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351161
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 565 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGGS, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 W 23RD AVENUE
 City EUGENE State OR Zip Code 97405-2871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397209
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRIGGS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2296 SARANAC AVE.
 City LAKE PLACID State NY Zip Code 12946-3375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIGGS NORFOLK LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378956
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRIGGS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2296 SARANAC AVE.
 City LAKE PLACID State NY Zip Code 12946-3375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIGGS NORFOLK LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391898
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 566 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGGS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2296 SARANAC AVE.
 City LAKE PLACID State NY Zip Code 12946-3375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIGGS NORFOLK LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRINKMEYER, MARC, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1085 HORNBY CREEK RD
 City SANDPOINT State ID Zip Code 83864-8395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RILEY CREEK TIMBER Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379110
 Amount of Each Receipt this Period 75000.00
 Memo Item CONTRIBUTION

C. BRISTOW, RYLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 5005
 City SEVERNA PARK State MD Zip Code 21146-0358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL FOODS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359044
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 567 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRITSCH, HANS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2018
 City VISTA State CA Zip Code 92085-2018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407019
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BRITTON, BEATRICE, T., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2327
 466 HIGHLAND STREET
 City SO. HAMILTON State MA Zip Code 01982-0327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.353993
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BRITTON, KATHY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3706 DEL MONTE DRIVE
 City HOUSTON State TX Zip Code 77019-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERRY HOMES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415041
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRITTON, MELVIN, , ,

Mailing Address 8545 CARMEL VALLEY ROAD

City CARMEL	State CA	Zip Code 93923-9556
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEITZ MEDICAL	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2016

Transaction ID : SA11A.346884

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRITTON, MELVIN, , ,

Mailing Address 8545 CARMEL VALLEY ROAD

City CARMEL	State CA	Zip Code 93923-9556
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEITZ MEDICAL	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2016

Transaction ID : SA11A.366971

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRITTON, MELVIN, , ,

Mailing Address 8545 CARMEL VALLEY ROAD

City CARMEL	State CA	Zip Code 93923-9556
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEITZ MEDICAL	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
654.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2016

Transaction ID : SA11A.420227

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRITTON, RAYFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 SILVER SPUR
 City HORSESHOE BAY State TX Zip Code 78657-5642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416264
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BRITTON, RAYFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 SILVER SPUR
 City HORSESHOE BAY State TX Zip Code 78657-5642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416265
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BROADWELL, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 392 VANDERBILT ROAD
 City ASHEVILLE State NC Zip Code 28803-3036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369310
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

750.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROADWELL, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 392 VANDERBILT ROAD
 City ASHEVILLE State NC Zip Code 28803-3036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401729
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BROAD, EDYTHE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 OAKMONT DR
 City LOS ANGELES State CA Zip Code 90049-1901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346106
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. BROAD, EDYTHE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 OAKMONT DR
 City LOS ANGELES State CA Zip Code 90049-1901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346109
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10900.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROAD, ELI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 AVENUE OF THE STARS STE 3000
 City LOS ANGELES State CA Zip Code 90067-5058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346105
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. BROAD, ELI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 AVENUE OF THE STARS STE 3000
 City LOS ANGELES State CA Zip Code 90067-5058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346108
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

C. BROCKETT, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 CENTRAL PARK WEST 11G
 City NEW YORK State NY Zip Code 10023-7708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 QUINN EMANUEL ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 10 / 2016
Transaction ID : SA11A.346960
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 572 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROCKETT, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 CENTRAL PARK WEST
 11G
 City NEW YORK State NY Zip Code 10023-7708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUINN EMANUEL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 08 / 10 / 2016
Transaction ID : SA11A.364142
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. BROCKETT, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 CENTRAL PARK WEST
 11G
 City NEW YORK State NY Zip Code 10023-7708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUINN EMANUEL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 09 / 10 / 2016
Transaction ID : SA11A.393777
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. BROCKHURST, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 SCOTT DRIVE
 City ANNAPOLIS State MD Zip Code 21401-1233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEEMS CREEK SOLUTIONS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 07 / 30 / 2016
Transaction ID : SA11A.359842
 Amount of Each Receipt this Period
 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 573 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROCKHURST, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 SCOTT DRIVE
 City ANNAPOLIS State MD Zip Code 21401-1233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEEMS CREEK SOLUTIONS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384776
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BROERTJES, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3029 OAKTREE LANE
 City HOLLYWOOD State FL Zip Code 33021-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348426
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BROERTJES, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3029 OAKTREE LANE
 City HOLLYWOOD State FL Zip Code 33021-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352115
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROERTJES, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3029 OAKTREE LANE
 City HOLLYWOOD State FL Zip Code 33021-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360136
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROERTJES, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3029 OAKTREE LANE
 City HOLLYWOOD State FL Zip Code 33021-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362182
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROERTJES, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3029 OAKTREE LANE
 City HOLLYWOOD State FL Zip Code 33021-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368344
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 575 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROERTJES, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3029 OAKTREE LANE
 City HOLLYWOOD State FL Zip Code 33021-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 05 / 2016
Transaction ID : SA11A.389091
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BROERTJES, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3029 OAKTREE LANE
 City HOLLYWOOD State FL Zip Code 33021-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408410
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. BROLICK, EMIL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1107
 City LELAND State MI Zip Code 49654-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1999.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385045
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROLING, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 655 WOODLAND DRIVE
 City CRYSTAL LAKE State IL Zip Code 60014-5214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383832
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROLING, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 655 WOODLAND DRIVE
 City CRYSTAL LAKE State IL Zip Code 60014-5214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390207
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROLING, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 655 WOODLAND DRIVE
 City CRYSTAL LAKE State IL Zip Code 60014-5214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402707
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 577 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROMWICH, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6300 POST ROAD

City DUBLIN	State OH	Zip Code 43017-1226
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.361036

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. BROOKINS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10275 COLLINS AVENUE
1125

City BAL HARBOUR	State FL	Zip Code 33154-1417
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408937

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BROOKINS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10275 COLLINS AVENUE
1125

City BAL HARBOUR	State FL	Zip Code 33154-1417
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420030

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 578 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROOKS, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1722 GREYSTONE COURT
 City LONGWOOD State FL Zip Code 32779-3140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C. E. BROOKS MANAGEMENT COMPANY Occupation (for Individual) HOTEL & REAL ESTATE INVESTMEN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402612
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. BROOKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 TRURO LANE
 City CROFTON State MD Zip Code 21114-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378839
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BROOKS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7315 CHESTER RD
 City FAIRVIEW State TN Zip Code 37062-7306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUARDIAN HEALTHCARE PROVIDERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413282
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 579 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROOKS, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 794 1/2 JOSILYN COURT
 City GRAND JUNCTION State CO Zip Code 81506-8654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362842
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BROOKS, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 794 1/2 JOSILYN COURT
 City GRAND JUNCTION State CO Zip Code 81506-8654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392655
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BROOKS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 KNAPP ROAD
 City CEDAR RAPIDS State IA Zip Code 52403-9034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360299
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 580 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROOKSHIRE, WILLIAM, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7825 PARK PLACE

City HOUSTON	State TX	Zip Code 77087-4639
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) S & B ENGINEERS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15400.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016
Transaction ID : SA11A.364273

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. BROOKSHIRE, WILLIAM, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7825 PARK PLACE

City HOUSTON	State TX	Zip Code 77087-4639
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) S & B ENGINEERS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15400.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2016
Transaction ID : SA11A.396335

Amount of Each Receipt this Period
10400.00

Memo Item
CONTRIBUTION

C. BROSS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 79 RIVERBEND CT.

City EDWARDS	State CO	Zip Code 81632-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016
Transaction ID : SA11A.380691

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 581 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROST, GARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 DELAWARE AVE UNIT 1509
 City BUFFALO State NY Zip Code 14202-2111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC INVESTMENTS AND HOLDINGS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391363
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. BROTHERS, THOMAS, F., MR., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8304 SE PALM HAMMOCK LANE
 City HOBE SOUND State FL Zip Code 33455-8224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.374075
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BROUILLETTE, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7708 SASSCER LANE
 City UPPER MARLBORO State MD Zip Code 20772-9742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.360262
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 582 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ALBERT, P., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1472 CAMP ST
 City NEW ORLEANS State LA Zip Code 70130-4244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.377765
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. BROWN, ALBERT, P., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1472 CAMP ST
 City NEW ORLEANS State LA Zip Code 70130-4244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394786
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BROWN, ALBERT, P., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1472 CAMP ST
 City NEW ORLEANS State LA Zip Code 70130-4244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412413
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 583 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ALBERT, P., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1472 CAMP ST

City NEW ORLEANS	State LA	Zip Code 70130-4244
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
334.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412423

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BROWN, ALICE, C., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 DRIFTWOOD LANDING RD

City GULF STREAM	State FL	Zip Code 33483-7221
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.407200

Amount of Each Receipt this Period
55800.00

Memo Item
CONTRIBUTION

C. BROWN, BARRETT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5626 CEDAR CREEK DR

City HOUSTON	State TX	Zip Code 77056-2310
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FONDREN ORTHOPEDIC GROUP	Occupation (for Individual) ORTHOPEDIC SURGEON
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413847

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	56150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 584 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3767 HARBORWOOD RD
 City SALEM State VA Zip Code 24153-5792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AZTEC RENTAL Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388700
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BROWN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10049 COLVILLE ST
 City EAGLE RIVER State AK Zip Code 99577-8362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355773
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10049 COLVILLE ST
 City EAGLE RIVER State AK Zip Code 99577-8362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380727
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 585 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10049 COLVILLE ST
 City EAGLE RIVER State AK Zip Code 99577-8362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408013
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWNING, CHARLES, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23731 RIDGE RD
 City GERMANTOWN State MD Zip Code 20876-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWNING CONSTRUCTION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361138
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BROWN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 BAYSHORE HIGHWAY
 City BURLINGAME State CA Zip Code 94010-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361488
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 586 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15686 COW FACE ROAD
 City LOWELL State AR Zip Code 72745-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387773
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BROWN, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15686 COW FACE ROAD
 City LOWELL State AR Zip Code 72745-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.392204
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. BROWN, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15686 COW FACE ROAD
 City LOWELL State AR Zip Code 72745-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402992
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 587 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15686 COW FACE ROAD
 City LOWELL State AR Zip Code 72745-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403008
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BROWN, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15686 COW FACE ROAD
 City LOWELL State AR Zip Code 72745-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403010
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. BROWN, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15686 COW FACE ROAD
 City LOWELL State AR Zip Code 72745-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419093
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 588 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2999 38TH STREET NW
 City WASHINGTON State DC Zip Code 20016-5402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400472
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BROWN, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6615 LATYSON LANE NE
 City BAINBRIDGE ISLAND State WA Zip Code 98110-4072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEYERHAEUSER COM Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401606
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BROWN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WEDGEWOOD LN
 City VOORHEESVILLE State NY Zip Code 12186-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359609
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WEDGEWOOD LN
 City VOORHEESVILLE State NY Zip Code 12186-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400990
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BROWN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WEDGEWOOD LN
 City VOORHEESVILLE State NY Zip Code 12186-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420332
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BROWN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WEDGEWOOD LN
 City VOORHEESVILLE State NY Zip Code 12186-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420335
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 590 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26291 MIRA WAY
 City BONITA SPRINGS State FL Zip Code 34134-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412033
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 WESTERN AVENUE NW
 City FARIBAULT State MN Zip Code 55021-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374365
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 WESTERN AVENUE NW
 City FARIBAULT State MN Zip Code 55021-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399678
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 WESTERN AVENUE NW
 City FARIBAULT State MN Zip Code 55021-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407154
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. BROWN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 FRONT ST APT 901 SUITE 12
 City SAN DIEGO State CA Zip Code 92101-6010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILBERRAD, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.373413
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. BROWN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5727 MAURER RD
 City SHAWNEE State KS Zip Code 66217-9505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386088
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 592 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 NORTH LAKE RD.
 City COLUMBIAVILLE State MI Zip Code 48421-8961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTINA, KENT & GIBBONS, P.C. Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396786
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 NORTH LAKE RD.
 City COLUMBIAVILLE State MI Zip Code 48421-8961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTINA, KENT & GIBBONS, P.C. Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410665
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 NORTH LAKE RD.
 City COLUMBIAVILLE State MI Zip Code 48421-8961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTINA, KENT & GIBBONS, P.C. Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410705
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 593 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, KIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4351 NORTH LAKE RD.

City COLUMBIAVILLE	State MI	Zip Code 48421-8961
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MATTINA, KENT & GIBBONS, P.C.	Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
459.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410711

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. BROWNE, KINGSLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 PROVINCIAL DRIVE

City ANN ARBOR	State MI	Zip Code 48104-4112
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WAYNE STATE UNIVERSITY	Occupation (for Individual) LAW PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2016

Transaction ID : SA11A.394593

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. BROWN, L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 721 W 300 SO

City LEHI	State UT	Zip Code 84043-2518
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362169

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 W 300 SO
 City LEHI State UT Zip Code 84043-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364853
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BROWN, L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 W 300 SO
 City LEHI State UT Zip Code 84043-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407831
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BROWN, L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 W 300 SO
 City LEHI State UT Zip Code 84043-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415905
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 W 300 SO
 City LEHI State UT Zip Code 84043-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416018
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BROWN, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 TIMBERWOOD CIR
 City AUSTIN State TX Zip Code 78703-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWN DISTRIBUTING COMPANY Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367945
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. BROWN, LYONS, , AMB,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 DRIFTWOOD LANDING RD
 City GULF STREAM State FL Zip Code 33483-7221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44200.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.407199
 Amount of Each Receipt this Period 44200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 46750.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 596 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address TWO RAVINIA SUITE 1350

City ATLANTA State GA Zip Code 30346-2116

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEALTH CARE CAPITAL CONSOLIDATED, INC. Occupation (for Individual) CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 30 / 2016

Transaction ID : SA11A.359853

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

B. BROWN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address TWO RAVINIA SUITE 1350

City ATLANTA State GA Zip Code 30346-2116

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEALTH CARE CAPITAL CONSOLIDATED, INC. Occupation (for Individual) CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2016

Transaction ID : SA11A.419740

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. BROWN, MISTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 359 KELLER PKWY

City KELLER State TX Zip Code 76248-2206

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTAL SURGEON

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 26 / 2016

Transaction ID : SA11A.355397

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, MISTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 KELLER PKWY
 City KELLER State TX Zip Code 76248-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTAL SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BROWN, MISTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 KELLER PKWY
 City KELLER State TX Zip Code 76248-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTAL SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358407
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, MISTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 KELLER PKWY
 City KELLER State TX Zip Code 76248-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTAL SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382488
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 598 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, MISTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 359 KELLER PKWY

City KELLER	State TX	Zip Code 76248-2206
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTAL SURGEON
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419626

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BROWN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 607 OXFORD ST

City BELVIDERE	State NJ	Zip Code 07823-1601
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.393831

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BROWN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 607 OXFORD ST

City BELVIDERE	State NJ	Zip Code 07823-1601
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398816

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 599 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 607 OXFORD ST

City BELVIDERE	State NJ	Zip Code 07823-1601
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405889

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BROWN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 607 OXFORD ST

City BELVIDERE	State NJ	Zip Code 07823-1601
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422723

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BROWN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 607 OXFORD ST

City BELVIDERE	State NJ	Zip Code 07823-1601
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422733

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 600 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24681 WYNDHURST 101
 City BONITA SPRINGS State FL Zip Code 34134-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374177
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BROWN, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 HIGHGATE ROAD
 City WESTLAKE VILLAGE State CA Zip Code 91361-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.348197
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROWN, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 HIGHGATE ROAD
 City WESTLAKE VILLAGE State CA Zip Code 91361-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354528
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 601 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ROBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2164 HIGHGATE ROAD

City WESTLAKE VILLAGE	State CA	Zip Code 91361-3523
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380021

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BROWN, ROBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2164 HIGHGATE ROAD

City WESTLAKE VILLAGE	State CA	Zip Code 91361-3523
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411745

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BROWN, STANLEY, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 268

City LOGANVILLE	State PA	Zip Code 17342-0268
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BROWNS ORCHARDS	Occupation (for Individual) FRUIT GROWER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.361330

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 602 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13027 NORTH 17 TH PLACE

City PHOENIX	State AZ	Zip Code 85022-5067
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399419

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BROWN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 460 RIVERSIDE DRIVE

City FREDERICKSBURG	State VA	Zip Code 22401-3170
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HSSI	Occupation (for Individual) LOGISTICS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350472

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BROWN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 460 RIVERSIDE DRIVE

City FREDERICKSBURG	State VA	Zip Code 22401-3170
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HSSI	Occupation (for Individual) LOGISTICS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359291

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 603 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 460 RIVERSIDE DRIVE

City FREDERICKSBURG	State VA	Zip Code 22401-3170
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HSSI	Occupation (for Individual) LOGISTICS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368511

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BROWN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 460 RIVERSIDE DRIVE

City FREDERICKSBURG	State VA	Zip Code 22401-3170
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HSSI	Occupation (for Individual) LOGISTICS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.406354

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. BRUCE, ROBERT, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 960 W BUTTERMILK ROAD

City ASPEN	State CO	Zip Code 81611-2727
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11A.379444

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 604 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUCE, ROBERT, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 960 W BUTTERMILK ROAD
 City ASPEN State CO Zip Code 81611-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401091
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. BRUDER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 REED ROAD SUITE 301
 City BROOMALL State PA Zip Code 19008-3505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357425
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. BRUEN, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CRESCENT VIEW CT
 City THE WOODLANDS State TX Zip Code 77381-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354505
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 605 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUEN, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CRESCENT VIEW CT
 City THE WOODLANDS State TX Zip Code 77381-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379980
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. BRUEN, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CRESCENT VIEW CT
 City THE WOODLANDS State TX Zip Code 77381-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408655
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. BRUGGEMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1761 HARDIN LANE
 City POWELL State OH Zip Code 43065-9646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382260
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 606 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUGGEMAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1761 HARDIN LANE

City POWELL	State OH	Zip Code 43065-9646
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392109

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BRUGGEMAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1761 HARDIN LANE

City POWELL	State OH	Zip Code 43065-9646
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398614

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BRUGGEMAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1761 HARDIN LANE

City POWELL	State OH	Zip Code 43065-9646
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398617

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 607 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUGGEMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1761 HARDIN LANE
 City POWELL State OH Zip Code 43065-9646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416188
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BRUNDIDGE, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 VIA ROMERO
 City PALOS VERDES ESTAT State CA Zip Code 90274-2874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357128
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRUNDIDGE, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 VIA ROMERO
 City PALOS VERDES ESTAT State CA Zip Code 90274-2874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357130
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 608 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNETTI, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 BAL BAY DRIVE
 City BAL HARBOUR State FL Zip Code 33154-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUNETTI ORGANIZATION Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406989
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BRUNE, LEON, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2050 S 1400 E APT 9 APT. 9
 City SAINT GEORGE State UT Zip Code 84790-6851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUNE MORTUARY Occupation (for Individual) MORTICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361501
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BRUNER, STEPHEN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1035 BERKSHIRE STREET
 City OAK PARK State IL Zip Code 60302-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361426
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 609 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNER, STEPHEN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1035 BERKSHIRE STREET
 City OAK PARK State IL Zip Code 60302-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391418
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BRUNER, STEPHEN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1035 BERKSHIRE STREET
 City OAK PARK State IL Zip Code 60302-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414441
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BRUNNER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 EAST WASHINGTON STREET
 City URBANA State IL Zip Code 61802-9502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402639
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 610 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNNER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 EAST WASHINGTON STREET

City URBANA	State IL	Zip Code 61802-9502
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.423052

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. BRUNNER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 EAST WASHINGTON STREET

City URBANA	State IL	Zip Code 61802-9502
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.423054

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BRUNNER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 EAST WASHINGTON STREET

City URBANA	State IL	Zip Code 61802-9502
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.423079

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 611 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNNER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 EAST WASHINGTON STREET
 City URBANA State IL Zip Code 61802-9502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.423081
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BRUNO, NICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5676 RIDGE PARK DR.
 City LOOMIS State CA Zip Code 95650-9400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS & BRUNO INTERNATIONAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384866
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BRUNOFF, SUSAN, V., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 W CEDAR STREET
 City NEW HOLLAND State PA Zip Code 17557-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347796
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 612 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNOFF, SUSAN, V., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 W CEDAR STREET
 City NEW HOLLAND State PA Zip Code 17557-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360939
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BRUNOFF, SUSAN, V., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 W CEDAR STREET
 City NEW HOLLAND State PA Zip Code 17557-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361181
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BRUNOFF, SUSAN, V., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 W CEDAR STREET
 City NEW HOLLAND State PA Zip Code 17557-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 985.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361344
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 613 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUNOFF, SUSAN, V., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 W CEDAR STREET

City NEW HOLLAND	State PA	Zip Code 17557-
---------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
985.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.377717

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BRUNSMAN, KENNETH, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 CORONADO DRIVE

City KERRVILLE	State TX	Zip Code 78028-3814
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389520

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BRUSSEAU, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28292 LONE JACK ROAD

City ENCINITAS	State CA	Zip Code 92024-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEWPORT NATIONAL	Occupation (for Individual) INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349352

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 614 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRUSSEAU, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28292 LONE JACK ROAD

City ENCINITAS	State CA	Zip Code 92024-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEWPORT NATIONAL	Occupation (for Individual) INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2016

Transaction ID : SA11A.411764

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. BRUSSEAU, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28292 LONE JACK ROAD

City ENCINITAS	State CA	Zip Code 92024-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEWPORT NATIONAL	Occupation (for Individual) INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11A.415538

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. BRYAN, FREDERICK, E., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI	State OH	Zip Code 45243-3718
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11A.418863

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 615 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYAN, FREDERICK, E., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI	State OH	Zip Code 45243-3718
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11A.418868

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BRYAN, FREDERICK, E., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI	State OH	Zip Code 45243-3718
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11A.418909

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BRYAN, FREDERICK, E., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8980 INDIAN RIDGE LN

City CINCINNATI	State OH	Zip Code 45243-3718
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11A.418913

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 616 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYANT, RONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2151 OLDHAM LANE
 City ABILENE State TX Zip Code 79602-6105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411230
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. BRYANT, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 SUTALLEE RIDGE TRAIL
 City WHITE State GA Zip Code 30184-3035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBRYIT, INC. Occupation (for Individual) WOMAN OWNED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401272
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374478
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 617 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400129
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400953
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408382
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 618 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410274
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412389
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BRYSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73456 COUNTRY CLUB DR. SPC 343
 City PALM DESERT State CA Zip Code 92260-8619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417534
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 619 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCHANAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 OLD TAVERN ROAD
 City NEWTOWN State CT Zip Code 06470-1781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUCHANAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 OLD TAVERN ROAD
 City NEWTOWN State CT Zip Code 06470-1781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358664
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUCHAN, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BATES DRIVE
 City JOHNSTOWN State PA Zip Code 15905-1700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXERCISE INSTRUCTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 06 / 2016**
Transaction ID : SA11A.363342
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 620 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCHAN, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BATES DRIVE
 City JOHNSTOWN State PA Zip Code 15905-1700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXERCISE INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388361
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUCHAN, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BATES DRIVE
 City JOHNSTOWN State PA Zip Code 15905-1700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXERCISE INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388365
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUCHAN, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BATES DRIVE
 City JOHNSTOWN State PA Zip Code 15905-1700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXERCISE INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419328
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 621 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCHHEIT, CHARLES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 108

City MINOCQUA	State WI	Zip Code 54548-0108
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406101

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. BUCHHEIT, GERALD, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6210 OLD LAKE SHORE RD

City LAKE VIEW	State NY	Zip Code 14085-9548
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUAKER CROSSING	Occupation (for Individual) REAL ESTATE DEVELOPER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.371562

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. BUCHWALD, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17156 GLEN ROAD

City MT. VERNON	State OH	Zip Code 43050-9020
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409996

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 622 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCHWALD, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17156 GLEN ROAD
 City MOUNT VERNON State OH Zip Code 43050-9020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392639
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386642
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401376
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 623 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401377
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416969
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BUCKEL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 KETCH LANE
 City LONGBOAT KEY State FL Zip Code 34228-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416971
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 624 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUCSKO, DANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3262 CRESTMMOOR DRIVE
 City SAINT PAUL State MN Zip Code 55125-5010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.396988
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BUDAY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2749 SUNNY LEDGE CT
 City LAND O LAKES State FL Zip Code 34638-6085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388228
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BUDAY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2749 SUNNY LEDGE CT
 City LAND O LAKES State FL Zip Code 34638-6085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413749
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 625 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUDAY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2749 SUNNY LEDGE CT
 City LAND O LAKES State FL Zip Code 34638-6085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413795
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUDD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 AIR STIP ROAD
 City JACKSON State GA Zip Code 30233-4015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351995
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUDGE, WILLIAM, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 DOWNEY WAY
 City HILLSBOROUGH State CA Zip Code 94010-6110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365186
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 626 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City HIGHLANDS RANCH State CO Zip Code 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349351
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City HIGHLANDS RANCH State CO Zip Code 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359342
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City HIGHLANDS RANCH State CO Zip Code 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364983
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 627 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City State Zip Code
 HIGHLANDS RANCH CO 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2016
Transaction ID : SA11A.389195
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City State Zip Code
 HIGHLANDS RANCH CO 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402465
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BUEHNER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 WOODLAND CIRCLE
 City State Zip Code
 HIGHLANDS RANCH CO 80126-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410597
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 628 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 SRONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.356490
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 SRONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.404814
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUERGER, MARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 SRONY RIDGE CT.
 City HILLSDALE State MI Zip Code 49242-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.404815
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 629 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362833
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372368
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387327
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 630 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUFFINGTON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397927
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUFORD, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 PALACIO
 City AMARILLO State TX Zip Code 79109-5027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.353897
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUFORD, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 PALACIO
 City AMARILLO State TX Zip Code 79109-5027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419935
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 631 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUGEIA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CHERRY HILL CT.
 City DEARBORN State MI Zip Code 48124-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349236
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BUGEIA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CHERRY HILL CT.
 City DEARBORN State MI Zip Code 48124-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368611
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BUGEIA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CHERRY HILL CT.
 City DEARBORN State MI Zip Code 48124-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374701
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 632 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BUGEIA, MARY, , ,		Date of Receipt MM / DD / YYYY 09 / 19 / 2016
Mailing Address 7 CHERRY HILL CT.		Transaction ID : SA11A.399604
City DEARBORN	State MI	Zip Code 48124-1115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BUGEIA, MARY, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 7 CHERRY HILL CT.		Transaction ID : SA11A.420071
City DEARBORN	State MI	Zip Code 48124-1115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BUGGY, J., J., ,		Date of Receipt MM / DD / YYYY 09 / 19 / 2016
Mailing Address 146 STONEGATE DRIVE		Transaction ID : SA11A.397020
City AIKEN	State SC	Zip Code 29803-9626
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 633 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUGNA, JENNY, C., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2458
 City MISSION VIEJO State CA Zip Code 92690-0458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.347204
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BUGNA, JENNY, C., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2458
 City MISSION VIEJO State CA Zip Code 92690-0458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361460
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. BUGNA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 LAUREN CIRCLE
 City SCOTTS VALLEY State CA Zip Code 95066-3814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358422
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 634 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BUGNA, MARY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 29 / 2016
Mailing Address 116 LAUREN CIRCLE		Transaction ID : SA11A.358423
City SCOTTS VALLEY	State CA	Zip Code 95066-3814
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BUHOLZER, RON, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2016
Mailing Address 2716 22ND AVE		Transaction ID : SA11A.359423
City MONROE	State WI	Zip Code 53566-3626
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) KLONDIKE CHEESE CO.	Occupation (for Individual) CHEESE MAKER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BUI, SINH, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 02 / 2016
Mailing Address 803 GRANT STREET		Transaction ID : SA11A.360045
City HERNDON	State VA	Zip Code 20170-4620
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) WEICHERT REALTORS	Occupation (for Individual) REALTOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 635 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUKRY, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3707 BRANDY ROCK WAY
 City REDWOOD CITY State CA Zip Code 94061-1900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376696
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

B. BULETTE, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 S QUEEN ST
 City YORK State PA Zip Code 17403-4611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419157
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. BULL, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 E HAYWARD AVENUE
 City PHOENIX State AZ Zip Code 85020-4038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.360942
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 636 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24932 BUCKBOARD LN.
 City LAGUNA HILLS State CA Zip Code 92653-5723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.353017
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BULLER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 SAN ANGELO DR.
 City BISMARCK State ND Zip Code 58504-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352202
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BULLER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 SAN ANGELO DR.
 City BISMARCK State ND Zip Code 58504-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366927
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 637 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 SAN ANGELO DR.
 City BISMARCK State ND Zip Code 58504-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374813
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BULLER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 SAN ANGELO DR.
 City BISMARCK State ND Zip Code 58504-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390710
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BULLER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 SAN ANGELO DR.
 City BISMARCK State ND Zip Code 58504-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394569
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 638 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 SAN ANGELO DR.
 City BISMARCK State ND Zip Code 58504-7467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406125
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356253
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

C. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368073
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	152.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 639 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374355
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383009
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

C. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397913
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 77.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 640 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407850
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BULLOCK, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 BANYAN DRIVE
 City LOS ANGELES State CA Zip Code 90049-1801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411282
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

C. BULLOCK, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19288 KERAIN RANCH
 City SARATOGA State CA Zip Code 95070-5175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346977
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2752.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 641 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BULMAHN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 581 WESTOVER PLACE
 City PASADENA State CA Zip Code 91105-2845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.383504
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BUMP, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2822 15TH AVENUE
 City LONGMONT State CO Zip Code 80503-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALD INC. Occupation (for Individual) PARALEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403363
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. BUMP, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2822 15TH AVENUE
 City LONGMONT State CO Zip Code 80503-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALD INC. Occupation (for Individual) PARALEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403372
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 642 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUMP, STEFAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2822 15TH AVENUE
 City LONGMONT State CO Zip Code 80503-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALD INC. Occupation (for Individual) PARALEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403373
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BUNCH, RANDEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 S MEADOWLARK LN
 City OTHELLO State WA Zip Code 99344-9530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBHA Occupation (for Individual) RURAL FAMILY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368330
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUNCH, RANDEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 S MEADOWLARK LN
 City OTHELLO State WA Zip Code 99344-9530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBHA Occupation (for Individual) RURAL FAMILY PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398797
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 643 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BUNCH, RANDEL, , ,

Mailing Address **810 S MEADOWLARK LN**

City OTHELLO	State WA	Zip Code 99344-9530
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBHA	Occupation (for Individual) RURAL FAMILY PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.414165

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BUNDY, JOHN, , ,

Mailing Address **5443 45TH AVE W**

City SEATTLE	State WA	Zip Code 98199-1043
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
08 / 17 / 2016

Transaction ID : SA11A.367926

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BUNKER, TOD, , ,

Mailing Address **1516 SAINTSBURY DRIVE**

City LAS VEGAS	State NV	Zip Code 89144-1141
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FCTR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 05 / 2016

Transaction ID : SA11A.345185

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 644 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUNNELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 BOUNTY ROAD W
 City BENBROOK State TX Zip Code 76132-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.367276
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUNTING, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 440 KIRTLAND ST SW
 City GRAND RAPIDS State MI Zip Code 49507-2331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTO-WARES HOLDINGS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411507
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BURANDT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6335 SUNBRIAR DRIVE
 City CUMMING State GA Zip Code 30040-7079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361357
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 645 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2016
Transaction ID : SA11A.346941
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

B. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2016
Transaction ID : SA11A.346943
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352065
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	68.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 646 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357410
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368232
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376067
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 647 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376069
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384906
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BURBULES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6902 HWY 111
 City SELLERSBURG State IN Zip Code 47172-9238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 09 / 03 / 2016
Transaction ID : SA11A.389218
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 648 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 PIN BROOK LANE
 City TUSCALOOSA State AL Zip Code 35406-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387422
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

B. BURCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 PIN BROOK LANE
 City TUSCALOOSA State AL Zip Code 35406-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420289
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. BURCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 PIN BROOK LANE
 City TUSCALOOSA State AL Zip Code 35406-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420298
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 649 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURCHFIELD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1609 W 12TH
 City HOUSTON State TX Zip Code 77008-6446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIPE DISTRIBUTORS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356240
 Amount of Each Receipt this Period 75.00
 Memo Item
CONTRIBUTION

B. BURCHFIELD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1609 W 12TH
 City HOUSTON State TX Zip Code 77008-6446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIPE DISTRIBUTORS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383051
 Amount of Each Receipt this Period 75.00
 Memo Item
CONTRIBUTION

C. BURCHFIELD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1609 W 12TH
 City HOUSTON State TX Zip Code 77008-6446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIPE DISTRIBUTORS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411276
 Amount of Each Receipt this Period 75.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 650 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURD, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2130 LAS TRAMPAS ROAD
 City ALAMO State CA Zip Code 94507-1862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406917
 Amount of Each Receipt this Period
 3500.00
 Memo Item
 CONTRIBUTION

B. BURDGE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 WILLOW WAY
 City VICTORIA State TX Zip Code 77904-3849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KLEAN CORP INT Occupation (for Individual) CHEMICAL MANUFACTURING
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.348150
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. BURDICK, THOMAS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31579 VINTNERS POINTE COURT
 City WINCHESTER State CA Zip Code 92596-8318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357880
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 8535.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 651 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURDICK, THOMAS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31579 VINTNERS POINTE COURT
 City WINCHESTER State CA Zip Code 92596-8318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361404
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BURDICK, THOMAS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31579 VINTNERS POINTE COURT
 City WINCHESTER State CA Zip Code 92596-8318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381479
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BURGESS, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1452 MILLBROOK ROAD
 City SANTA ANA State CA Zip Code 92705-3036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCADIA CHAIR COMPANY Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422613
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 652 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURGE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **CALLE NEGOCIO SUITE 200**

City SAN CLEMENTE	State CA	Zip Code 92673-
-----------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BURGE CORPORATION	Occupation (for Individual) BUILDER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
08 / 25 / 2016

Transaction ID : SA11A.379755

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BURGE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **CALLE NEGOCIO SUITE 200**

City SAN CLEMENTE	State CA	Zip Code 92673-
-----------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BURGE CORPORATION	Occupation (for Individual) BUILDER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.418078

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BURGE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **CALLE NEGOCIO SUITE 200**

City SAN CLEMENTE	State CA	Zip Code 92673-
-----------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BURGE CORPORATION	Occupation (for Individual) BUILDER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.418079

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 653 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURGETT, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11524 ROYALSHIRE DRIVE
 City DALLAS State TX Zip Code 75230-2914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371337
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BURGHART, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 PINENEEDLE COURT
 City GRAND JUNCTION State CO Zip Code 81506-8760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348239
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BURHANS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 SYCAMORE LN
 City NORTHBROOK State IL Zip Code 60062-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 370.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349079
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 654 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURHANS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 SYCAMORE LN
 City NORTHBROOK State IL Zip Code 60062-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360243
 Amount of Each Receipt this Period
 60.00
 Memo Item
 CONTRIBUTION

B. BURHANS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 SYCAMORE LN
 City NORTHBROOK State IL Zip Code 60062-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386878
 Amount of Each Receipt this Period
 60.00
 Memo Item
 CONTRIBUTION

C. BURHANS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 SYCAMORE LN
 City NORTHBROOK State IL Zip Code 60062-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419571
 Amount of Each Receipt this Period
 60.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 655 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURK, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 LA VISTA GRANDE
 City SANTA BARBARA State CA Zip Code 93103-2819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361337
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. BURKE, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10225 ALBEMARLE LANE
 City PHILADELPHIA State PA Zip Code 19114-1201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376729
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BURKE, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10225 ALBEMARLE LANE
 City PHILADELPHIA State PA Zip Code 19114-1201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378269
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 656 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, ARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10225 ALBEMARLE LANE

City PHILADELPHIA	State PA	Zip Code 19114-1201
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406741

Amount of Each Receipt this Period
180.00

Memo Item CONTRIBUTION

B. BURKETT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15502 AMBER HOLLOW LN.

City CYPRESS	State TX	Zip Code 77429-4952
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
397.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347463

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BURKETT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15502 AMBER HOLLOW LN.

City CYPRESS	State TX	Zip Code 77429-4952
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
397.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415834

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 657 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, JOHN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6440 BROOKSHIRE DRIVE
 City DALLAS State TX Zip Code 75230-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMBIT ENERGY Occupation (for Individual) CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358566
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. BURKE, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7710 N. MERRIE LANE
 City MILWAUKEE State WI Zip Code 53217-2962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385459
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

C. BURKE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 311
 City MENDHAM State NJ Zip Code 07945-0311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEAR CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348940
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 658 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 311
 City MENDHAM State NJ Zip Code 07945-0311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEAR CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372772
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BURKE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 311
 City MENDHAM State NJ Zip Code 07945-0311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEAR CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.401019
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030-1905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE AND INSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346490
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 659 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 E MAIN ST

City DAVIS	State OK	Zip Code 73030-1905
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE AND INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368632

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. BURKE, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 E MAIN ST

City DAVIS	State OK	Zip Code 73030-1905
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE AND INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368635

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. BURKE, MARILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 E MAIN ST

City DAVIS	State OK	Zip Code 73030-1905
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE AND INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372605

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 660 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030-1905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE AND INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372608
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BURLESON, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 MUSCOVY DRIVE
 City MCKINNEY State TX Zip Code 75070-5118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355737
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BURLESON, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 MUSCOVY DRIVE
 City MCKINNEY State TX Zip Code 75070-5118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380702
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 661 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURLESON, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 MUSCOVY DRIVE
 City MCKINNEY State TX Zip Code 75070-5118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408022
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BURMEISTER, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2628 NE 37TH STREET
 City FORT LAUDERDALE State FL Zip Code 33308-6312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409386
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BURMEISTER, PAUL, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1332 NE 180 ROAD
 City CLAFLIN State KS Zip Code 67525-9219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406690
 Amount of Each Receipt this Period 1100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 662 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURNETT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94-439 KUPUNA LP
 City WAIPAHU State HI Zip Code 96797-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF HAWAII Occupation (for Individual) TELECOMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383178
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BURNETT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94-439 KUPUNA LP
 City WAIPAHU State HI Zip Code 96797-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF HAWAII Occupation (for Individual) TELECOMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383179
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BURNS, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 RED ALDER CT
 City DANVILLE State CA Zip Code 94506-4548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALKER & DUNLOP, LLC Occupation (for Individual) MORTGAGE BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390068
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 663 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURNS, MICHAEL, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 MUIRFIELD LANE
 City SAINT LOUIS State MO Zip Code 63141-7373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIGNATURE MEDICAL GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.358861
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BURNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6227 E. VILLA CASSANDRA
 City CAVE CREEK State AZ Zip Code 85331-9148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359625
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BURNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6227 E. VILLA CASSANDRA
 City CAVE CREEK State AZ Zip Code 85331-9148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404401
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 664 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BURNS, VICKI, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2016
Mailing Address 7287 HORIZON DRIVE		Transaction ID : SA11A.411649
City WEST PALM BEACH	State FL	Zip Code 33412-3027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BURRISS, JOHN, A., , JR.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 29 / 2016
Mailing Address 415 161ST PLACE SE		Transaction ID : SA11A.357833
City BELLEVUE	State WA	Zip Code 98008-4831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BURRISS, JOHN, A., , JR.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 23 / 2016
Mailing Address 415 161ST PLACE SE		Transaction ID : SA11A.375307
City BELLEVUE	State WA	Zip Code 98008-4831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 665 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURRISS, JOHN, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 161ST PLACE SE
 City BELLEVUE State WA Zip Code 98008-4831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385520
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. BURRISS, JOHN, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 161ST PLACE SE
 City BELLEVUE State WA Zip Code 98008-4831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.406473
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. BURROUGH, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 POTAWATOMI RD.
 City WILLIAMS BAY State WI Zip Code 53191-9695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURROUGH'S FLOOR COVERINGS Occupation (for Individual) OWNER/SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388456
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 666 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURROUGH, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 POTAWATOMI RD.
 City WILLIAMS BAY State WI Zip Code 53191-9695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURROUGH'S FLOOR COVERINGS Occupation (for Individual) OWNER/SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419316
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BURSTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7317 WALNUT KNOLL DRIVE
 City SPRINGFIELD State VA Zip Code 22153-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394032
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348398
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 667 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.351024
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394312
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11A.400682
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 668 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412203
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BURT, ALLEN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13715 N. WILD HAZEL LANE
 City MARANA State AZ Zip Code 85658-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423050
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BURT, CHARLES, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8S041 CREEK DRIVE
 City NAPERVILLE State IL Zip Code 60540-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 767.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381547
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 669 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BURT, CHARLES, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8S041 CREEK DRIVE
 City NAPERVILLE State IL Zip Code 60540-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 767.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384291
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BURT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 LONGHOLM COURT
 City CHATTANOOGA State TN Zip Code 37405-2344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350017
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BURT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 LONGHOLM COURT
 City CHATTANOOGA State TN Zip Code 37405-2344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396616
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 670 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BURTCH, CHARLES, , ,		Date of Receipt MM / DD / YYYY 08 / 20 / 2016
Mailing Address 262 WELLINGTON DRIVE		Transaction ID : SA11A.376065
City AUSTIN	State TX	Zip Code 78737-4735
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BURTCH, CHARLES, , ,		Date of Receipt MM / DD / YYYY 08 / 27 / 2016
Mailing Address 262 WELLINGTON DRIVE		Transaction ID : SA11A.382973
City AUSTIN	State TX	Zip Code 78737-4735
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BURTCH, CHARLES, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2016
Mailing Address 262 WELLINGTON DRIVE		Transaction ID : SA11A.398009
City AUSTIN	State TX	Zip Code 78737-4735
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 671 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BURTCH, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 WELLINGTON DRIVE
 City AUSTIN State TX Zip Code 78737-4735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398013
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUSBY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 48
 City DOSS State TX Zip Code 78618-0048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350438
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUSCHEK, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 CALVADOS
 City NEWPORT COAST State CA Zip Code 92657-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361260
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 672 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTCHER IV, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 TALL OAKS LANE
 City NEWTOWN SQUARE State PA Zip Code 19073-2771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388220
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUTCHER IV, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 TALL OAKS LANE
 City NEWTOWN SQUARE State PA Zip Code 19073-2771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUTCHER IV, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 TALL OAKS LANE
 City NEWTOWN SQUARE State PA Zip Code 19073-2771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410429
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 673 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTCHER IV, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 TALL OAKS LANE
 City NEWTOWN SQUARE State PA Zip Code 19073-2771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419345
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346917
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356329
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 674 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 08 / 27 / 2016
Transaction ID : SA11A.383062
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.392039
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.411260
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 675 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 R E MAIN STREET
 City GLOUCESTER State MA Zip Code 01930-4141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391948
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUTLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 R E MAIN STREET
 City GLOUCESTER State MA Zip Code 01930-4141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397271
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUTLER, THOMAS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 N. GARFIELD STREET
 City HINSDALE State IL Zip Code 60521-3719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYNET, INC. Occupation (for Individual) BUSINESS EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402605
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, THOMAS, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 N. GARFIELD STREET
 City HINSDALE State IL Zip Code 60521-3719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYNET, INC. Occupation (for Individual) BUSINESS EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402614
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. BUZBEE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E DOUGLAS ST
 City DE SOTO State IL Zip Code 62924-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BUZBEE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E DOUGLAS ST
 City DE SOTO State IL Zip Code 62924-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405479
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 677 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUZBEE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E DOUGLAS ST
 City DE SOTO State IL Zip Code 62924-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405480
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUZBY, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HARBOUR DR 103-B
 City VERO BEACH State FL Zip Code 32963-2890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398815
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BUZBY, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HARBOUR DR 103-B
 City VERO BEACH State FL Zip Code 32963-2890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398817
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 678 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUZBY, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HARBOUR DR
 103-B
 City VERO BEACH State FL Zip Code 32963-2890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407465
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BUZBY, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HARBOUR DR
 103-B
 City VERO BEACH State FL Zip Code 32963-2890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407468
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. BYARS, EUGENE, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 796 MAYAPPLE COURT
 City HOOVER State AL Zip Code 35244-1492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389530
 Amount of Each Receipt this Period
 350.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 679 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BYERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1380 PLANTATION POINT DRIVE
 City FERNANDINA BEACH State FL Zip Code 32034-5033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356556
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BYRUM, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7007 BOEING DRIVE
 City EL PASO State TX Zip Code 79925-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATI JET INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349488
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BYRUM, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7007 BOEING DRIVE
 City EL PASO State TX Zip Code 79925-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATI JET INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374693
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 680 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BYRUM, LYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7007 BOEING DRIVE
City EL PASO State TX Zip Code 79925-1109
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ATI JET INC. Occupation (for Individual) CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399711
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. C RISAFI, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 835 SHARON DRIVE SUITE #400
City WESTLAKE State OH Zip Code 44145-7704
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CERES ENTERPRISE LLC Occupation (for Individual) SELF EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350207
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. C RISAFI, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 835 SHARON DRIVE SUITE #400
City WESTLAKE State OH Zip Code 44145-7704
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CERES ENTERPRISE LLC Occupation (for Individual) SELF EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350208
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 325.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 681 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CABELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6930 SARANAC LN
 City MATTHEWS State NC Zip Code 28105-6794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344414
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. CABELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6930 SARANAC LN
 City MATTHEWS State NC Zip Code 28105-6794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358999
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. CABELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6930 SARANAC LN
 City MATTHEWS State NC Zip Code 28105-6794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387845
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 682 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CABLE, JANE, , ,		Date of Receipt MM / DD / YYYY 07 / 14 / 2016
Mailing Address 1515 90TH PLACE NE		Transaction ID : SA11A.347580
City CLYDE HILL	State WA	Zip Code 98004-3329
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CABLE, JANE, , ,		Date of Receipt MM / DD / YYYY 07 / 19 / 2016
Mailing Address 1515 90TH PLACE NE		Transaction ID : SA11A.350565
City CLYDE HILL	State WA	Zip Code 98004-3329
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CABLE, JANE, , ,		Date of Receipt MM / DD / YYYY 07 / 31 / 2016
Mailing Address 1515 90TH PLACE NE		Transaction ID : SA11A.359640
City CLYDE HILL	State WA	Zip Code 98004-3329
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 683 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357162
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357163
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.361979
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 684 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363739
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366868
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CABOT, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 SNYDER ROAD
 City GREEN LANE State PA Zip Code 18054-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370491
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 685 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CABOT, MICHELE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1342 SNYDER ROAD

City GREEN LANE	State PA	Zip Code 18054-9542
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2016

Transaction ID : SA11A.400152

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CABOT, RICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 928 W. LUTZ LAKE FERN ROAD

City LUTZ	State FL	Zip Code 33548-5028
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST UMC OF LUTZ	Occupation (for Individual) CLERGY
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.350766

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CABOT, RICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 928 W. LUTZ LAKE FERN ROAD

City LUTZ	State FL	Zip Code 33548-5028
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST UMC OF LUTZ	Occupation (for Individual) CLERGY
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.373300

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 686 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CABOT, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 W. LUTZ LAKE FERN ROAD
 City LUTZ State FL Zip Code 33548-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST UMC OF LUTZ Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373301
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CABOT, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 W. LUTZ LAKE FERN ROAD
 City LUTZ State FL Zip Code 33548-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST UMC OF LUTZ Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388182
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CABOT, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 W. LUTZ LAKE FERN ROAD
 City LUTZ State FL Zip Code 33548-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST UMC OF LUTZ Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397606
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 687 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CADDELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 327**
 City **STATEN ISLAND** State **NY** Zip Code **10310-0327**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **CADDELL DRY DOCK** Occupation (for Individual) **CEO**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403218
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

B. CADIGAN, TANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **4531 CAMDEN DR.**
 City **CORONA DEL MAR** State **CA** Zip Code **92625-3103**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **PHYSICIAN**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.411108
 Amount of Each Receipt this Period **1000.00**
 Memo Item
CONTRIBUTION

C. CADY, WILLIAM, CURTIS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **1426 SOUTH 50TH STREET**
 City **KANSAS CITY** State **KS** Zip Code **66106-1726**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **07 / 06 / 2016**
Transaction ID : SA11A.345920
 Amount of Each Receipt this Period **25.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 688 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CADY, WILLIAM, CURTIS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1426 SOUTH 50TH STREET
 City KANSAS CITY State KS Zip Code 66106-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 06 / 2016
Transaction ID : SA11A.363346
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CADY, WILLIAM, CURTIS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1426 SOUTH 50TH STREET
 City KANSAS CITY State KS Zip Code 66106-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390676
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CAELL, TERESA, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6322 MYSTIC MEADOW
 City HOUSTON State TX Zip Code 77021-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356539
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 689 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAELL, TERESA, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6322 MYSTIC MEADOW
 City HOUSTON State TX Zip Code 77021-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380978
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. CAELL, TERESA, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6322 MYSTIC MEADOW
 City HOUSTON State TX Zip Code 77021-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396354
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CAELL, TERESA, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6322 MYSTIC MEADOW
 City HOUSTON State TX Zip Code 77021-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411758
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 690 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CAFFEY, TERRANCE, R., , JR

Mailing Address 1462 88TH AVE NE

City CLYDE HILL	State WA	Zip Code 98004-3350
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CASCA DE VISTA	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.356863

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CAHILL-ERVIN, SHARON, , ,

Mailing Address 335 MERIDIAN RUN DR

City COCOA	State FL	Zip Code 32926-2571
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE APPRAISER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353509

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CAHILL-ERVIN, SHARON, , ,

Mailing Address 335 MERIDIAN RUN DR

City COCOA	State FL	Zip Code 32926-2571
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE APPRAISER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : SA11A.375723

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 691 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAHILL-ERVIN, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 MERIDIAN RUN DR
 City COCOA State FL Zip Code 32926-2571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404215
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. CAIN, ERICKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17703 JOHN CONNOR ROAD
 City CORNELIUS State NC Zip Code 28031-7658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FINANCIAL INDEPENDENCE GROUP Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366590
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CAIN, ERICKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17703 JOHN CONNOR ROAD
 City CORNELIUS State NC Zip Code 28031-7658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FINANCIAL INDEPENDENCE GROUP Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398370
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 692 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385960
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.387010
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394439
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 693 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403742
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403760
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410006
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 694 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411927
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CAISSIE, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 MAIN ST.
 City HUDSON State MA Zip Code 01749-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415629
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECIA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352229
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 695 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECI/
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375844
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CALAHAN, SHANNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 BREAKERS COVE
 City BELTON State TX Zip Code 76513-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERANS AFFAIRS Occupation (for Individual) EMERGENCY MANAGEMENT SPECI/
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414240
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CALAWAY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12904 HACIENDA RIDGE
 City AUSTIN State TX Zip Code 78738-7662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WWE Occupation (for Individual) SPORTS ENTERTAINER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374299
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 696 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CALAWAY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12904 HACIENDA RIDGE
 City AUSTIN State TX Zip Code 78738-7662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WWE Occupation (for Individual) SPORTS ENTERTAINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423154
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CALCOTE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 ADMIRAL CT.
 City DESTIN State FL Zip Code 32541-5301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370216
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CALDEIRA, STEPHEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9021 BRICKYARD RD
 City POTOMAC State MD Zip Code 20854-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360270
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 697 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALDWELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2955 HARRISON ST.
 SUITE 103
 City BEAUMONT State TX Zip Code 77702-1155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370736
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CALHOUN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 472 GABRIEL DR.
 City KIRKWOOD State MO Zip Code 63122-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362549
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CALLAHAN, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 GRANDE WAY
 301
 City NAPLES State FL Zip Code 34110-6478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 04 / 2016
Transaction ID : SA11A.344212
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 698 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALLAHAN, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 GRANDE WAY
 301
 City NAPLES State FL Zip Code 34110-6478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362447
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CALLAHAN, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 GRANDE WAY
 301
 City NAPLES State FL Zip Code 34110-6478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 04 / 2016**
Transaction ID : SA11A.389183
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CALLAHAN, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 GRANDE WAY
 301
 City NAPLES State FL Zip Code 34110-6478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403204
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 699 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALLAHAN, JOHN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 295 GRANDE WAY
301

City NAPLES State FL Zip Code 34110-6478

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403205

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CALLAHAN, LEONORA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 ISLAND DR

City PALM BEACH State FL Zip Code 33480-4744

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381910

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. CALLAHAN, LEONORA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 ISLAND DR

City PALM BEACH State FL Zip Code 33480-4744

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384715

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 700 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALLAHAN, LEONORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 ISLAND DR
 City PALM BEACH State FL Zip Code 33480-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398972
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CALLAGHAN, ROBERT, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 MULBERRY LANE
 City ATHERTON State CA Zip Code 94027-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389480
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CALLAHAN, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 EL DRIVE
 City TAYLOR State PA Zip Code 18517-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389388
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 701 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CALLAHAN, WALTER, , ,

Mailing Address 109 EL DRIVE

City TAYLOR State PA Zip Code 18517-1003

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417441

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CALLEN, PAUL, , ,

Mailing Address 7833 LA MIRADA CIR

City BUENA PARK State CA Zip Code 90620-2308

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386660

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CALLEN, PAUL, , ,

Mailing Address 7833 LA MIRADA CIR

City BUENA PARK State CA Zip Code 90620-2308

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397856

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 702 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALLISTER, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1802 QUAIL RUN DRIVE
 City OGDEN State UT Zip Code 84403-3266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405861
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CALVERT, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 S. LOOP W.
 City HOUSTON State TX Zip Code 77054-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIKE CALVERT TOYOTA Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349505
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CALVERT, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 S. LOOP W.
 City HOUSTON State TX Zip Code 77054-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIKE CALVERT TOYOTA Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378982
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 703 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CALVERT, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 S. LOOP W.
 City HOUSTON State TX Zip Code 77054-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIKE CALVERT TOYOTA Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415935
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAMERON, DOUGLAS, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 S CLARK STREET SUITE 2050
 City CHICAGO State IL Zip Code 60603-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HI GROUP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383546
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CAMP, MONALEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7732 CHERRYHILL DRIVE
 City TYLER State TX Zip Code 75703-7374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348732
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 704 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMP, MONALEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7732 CHERRYHILL DRIVE
 City TYLER State TX Zip Code 75703-7374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374126
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAMPANA, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 GRAPE BAY
 City DOYLESTOWN State PA Zip Code 18902-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349143
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CAMPANA, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 GRAPE BAY
 City DOYLESTOWN State PA Zip Code 18902-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410879
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 705 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPANA, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 GRAPE BAY
 City DOYLESTOWN State PA Zip Code 18902-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410880
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAMPBELL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8837 GREEN ACORN LANE
 City TALLAHASSEE State FL Zip Code 32317-9647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBWAYS FOR GLORY OF GOD Occupation (for Individual) SUBWAY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405301
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CAMPBELL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8837 GREEN ACORN LANE
 City TALLAHASSEE State FL Zip Code 32317-9647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBWAYS FOR GLORY OF GOD Occupation (for Individual) SUBWAY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405303
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 706 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPBELL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8837 GREEN ACORN LANE
 City TALLAHASSEE State FL Zip Code 32317-9647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBWAYS FOR GLORY OF GOD Occupation (for Individual) SUBWAY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416400
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CAMPBELL, J. MELFORT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 PEMBRIDGE DRIVE APT 303
 City LAKE FOREST State IL Zip Code 60045-4216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379740
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CAMPBELL, J. MELFORT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 PEMBRIDGE DRIVE APT 303
 City LAKE FOREST State IL Zip Code 60045-4216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391420
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 707 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAMPBELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 902103
 City SANDY State UT Zip Code 84090-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 07 / 2016
Transaction ID : SA11A.363272
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. CAMPBELL, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 CLUB VIEW DRIVE
 City LOS ANGELES State CA Zip Code 90024-5306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361437
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CAMPBELL, WAYNE, E., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 23RD ST
 City NICEVILLE State FL Zip Code 32578-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370721
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 708 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CAMPBELL, WAYNE, E., DR., M.D.		Date of Receipt MM / DD / YYYY 09 / 01 / 2016 Transaction ID : SA11A.389352
Mailing Address 1751 23RD ST		Amount of Each Receipt this Period 50.00
City NICEVILLE	State FL	Zip Code 32578-2909
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CAMPBELL, WAYNE, E., DR., M.D.		Date of Receipt MM / DD / YYYY 09 / 16 / 2016 Transaction ID : SA11A.398678
Mailing Address 1751 23RD ST		Amount of Each Receipt this Period 100.00
City NICEVILLE	State FL	Zip Code 32578-2909
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CAMPION, SHELBY, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016 Transaction ID : SA11A.367938
Mailing Address 3648 LAKEVIEW BLVD		Amount of Each Receipt this Period 5000.00
City LAKE OSWEGO	State OR	Zip Code 97035-5546
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....	5150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 709 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANCIO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12599 NE 107 AV
 City MEDLEY State FL Zip Code 33178-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C&C CONCRETE PUMPING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4198.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352236
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. CANCIO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12599 NE 107 AV
 City MEDLEY State FL Zip Code 33178-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C&C CONCRETE PUMPING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4198.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366746
 Amount of Each Receipt this Period
 1198.00
 Memo Item
 CONTRIBUTION

C. CANCIO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12599 NE 107 AV
 City MEDLEY State FL Zip Code 33178-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C&C CONCRETE PUMPING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4198.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410172
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4198.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 710 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.349889
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364920
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385790
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 711 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396643
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397839
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404419
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 712 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404881
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CANEPA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 CARMEL RIVIERA DR.
 City CARMEL State CA Zip Code 93923-9736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410753
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CANFIELD, CHASE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 FAWNLAKE DR
 City HOUSTON State TX Zip Code 77079-7335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HI-TECH ELECTRIC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351947
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 713 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CANFIELD, CHASE, , ,			Date of Receipt MM / DD / YYYY 08 / 19 / 2016
Mailing Address 303 FAWNLAKE DR			Transaction ID : SA11A.376338
City HOUSTON	State TX	Zip Code 77079-7335	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HI-TECH ELECTRIC		Occupation (for Individual) ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CANFIELD, CHASE, , ,			Date of Receipt MM / DD / YYYY 08 / 19 / 2016
Mailing Address 303 FAWNLAKE DR			Transaction ID : SA11A.376339
City HOUSTON	State TX	Zip Code 77079-7335	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HI-TECH ELECTRIC		Occupation (for Individual) ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CANFIELD, PATRICIA, , ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2016
Mailing Address 7260 W. AZURE DR. #140 - 18			Transaction ID : SA11A.359077
City LAS VEGAS	State NV	Zip Code 89130-4413	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1050.00		

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 714 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANFIELD, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7260 W. AZURE DR. #140 - 18
 City LAS VEGAS State NV Zip Code 89130-4413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384899
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CANFIELD, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7260 W. AZURE DR. #140 - 18
 City LAS VEGAS State NV Zip Code 89130-4413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400747
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CANFIELD, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7260 W. AZURE DR. #140 - 18
 City LAS VEGAS State NV Zip Code 89130-4413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408159
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 715 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANFIELD, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7260 W. AZURE DR. #140 - 18
 City LAS VEGAS State NV Zip Code 89130-4413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410070
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CANFIELD, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7260 W. AZURE DR. #140 - 18
 City LAS VEGAS State NV Zip Code 89130-4413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422800
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CANNON, JR., CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 LONGBOAT CLUB RD #23B
 City LONGBOAT KEY State FL Zip Code 34228-3868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379407
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 716 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CANON, JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 TIQUEWOOD CIRCLE
 City ABILENE State TX Zip Code 79605-4937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUSBAND Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351914
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CANON, JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 TIQUEWOOD CIRCLE
 City ABILENE State TX Zip Code 79605-4937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUSBAND Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386736
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CANON, JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 TIQUEWOOD CIRCLE
 City ABILENE State TX Zip Code 79605-4937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUSBAND Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408577
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 717 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANON, JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 TIQUEWOOD CIRCLE
 City ABILENE State TX Zip Code 79605-4937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUSBAND Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409216
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CANTER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 COTTON CROSSING WEST
 City SAVANNAH State GA Zip Code 31411-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390932
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CANTIERI, EMILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 CARRIAGE SUMMITT WAY
 City HENDERSONVILLE State NC Zip Code 28791-2819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357181
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 718 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTIERI, EMILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 CARRIAGE SUMMITT WAY
 City HENDERSONVILLE State NC Zip Code 28791-2819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415717
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CANTIERO, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2017 PLAZA DE SANTE FE
 City LAS VEGAS State NV Zip Code 89102-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIM CANTIERO Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382876
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CANTIERO, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2017 PLAZA DE SANTE FE
 City LAS VEGAS State NV Zip Code 89102-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIM CANTIERO Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382877
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 719 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTIERO, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2017 PLAZA DE SANTE FE
 City LAS VEGAS State NV Zip Code 89102-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIM CANTIERO Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384573
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CANTOR, DREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4654 UPTON STREET, NW
 City WASHINGTON State DC Zip Code 20016-2368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PECK MADIGAN JONES Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375659
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 720 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358092
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359490
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386930
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 721 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396862
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397933
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CANTOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 JEWETT DRIVE
 City CINCINNATI State OH Zip Code 45215-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405381
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 722 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 JEWETT DRIVE

City CINCINNATI	State OH	Zip Code 45215-2647
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411060

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CANTOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 JEWETT DRIVE

City CINCINNATI	State OH	Zip Code 45215-2647
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411062

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CANTOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 JEWETT DRIVE

City CINCINNATI	State OH	Zip Code 45215-2647
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419509

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 723 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTRALL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 BOOK HILL ROAD
 City ESSEX State CT Zip Code 06426-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353770
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CANTRALL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 BOOK HILL ROAD
 City ESSEX State CT Zip Code 06426-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366710
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CANTRALL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 BOOK HILL ROAD
 City ESSEX State CT Zip Code 06426-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372409
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 724 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTRALL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 BOOK HILL ROAD
 City ESSEX State CT Zip Code 06426-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387015
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CANTRELL, LOWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29727 49TH PL S
 City AUBURN State WA Zip Code 98001-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367930
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. CAO, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MORNING VIEW DR.
 City NEWPORT COAST State CA Zip Code 92657-1500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT FAR EAST Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.352926
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 725 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPEL, JACQUELINE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7040 YOUNGSTOWN
 City HUDSONVILLE State MI Zip Code 49426-9374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARRY AND JACKIE CAPEL Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.348240
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CAPEL, JACQUELINE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7040 YOUNGSTOWN
 City HUDSONVILLE State MI Zip Code 49426-9374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARRY AND JACKIE CAPEL Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388676
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CAPEL, JACQUELINE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7040 YOUNGSTOWN
 City HUDSONVILLE State MI Zip Code 49426-9374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARRY AND JACKIE CAPEL Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 726 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPEL, JACQUELINE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7040 YOUNGSTOWN
 City HUDSONVILLE State MI Zip Code 49426-9374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARRY AND JACKIE CAPEL Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414935
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CAPPEL, MINNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5637 BRIAR DRIVE
 City HOUSTON State TX Zip Code 77056-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370268
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CAPPS, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11044 BIG CANOE
 City BIG CANOE State GA Zip Code 30143-5142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361896
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 727 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPPS, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11044 BIG CANOE
 City BIG CANOE State GA Zip Code 30143-5142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388183
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CAPPS, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11044 BIG CANOE
 City BIG CANOE State GA Zip Code 30143-5142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396913
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CAPPS, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11044 BIG CANOE
 City BIG CANOE State GA Zip Code 30143-5142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396915
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 728 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPRARO, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13998 KINGSWOOD
 City RIVERVIEW State MI Zip Code 48193-7856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349430
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CAPRARO, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13998 KINGSWOOD
 City RIVERVIEW State MI Zip Code 48193-7856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372138
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CAPRARO, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13998 KINGSWOOD
 City RIVERVIEW State MI Zip Code 48193-7856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390450
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 729 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAPRARO, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13998 KINGSWOOD
 City RIVERVIEW State MI Zip Code 48193-7856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400816
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CARAS, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1090 OLD MOUNAIN ROAD
 City KENNESAW State GA Zip Code 30152-4832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412111
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CARAS, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1090 OLD MOUNAIN ROAD
 City KENNESAW State GA Zip Code 30152-4832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412119
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 730 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CARAS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1090 OLD MOUNAIN ROAD
City KENNESAW State GA Zip Code 30152-4832
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412121
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CARAS, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1090 OLD MOUNAIN ROAD
City KENNESAW State GA Zip Code 30152-4832
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412127
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARD, ORSON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 401 WILLOUGHBY BLVD.
City GREENSBORO State NC Zip Code 27408-3135
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) HATRACK RIVER ENTERPRISES Occupation (for Individual) WRITER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380334
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 731 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARD, ORSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 WILLOUGHBY BLVD.
 City GREENSBORO State NC Zip Code 27408-3135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HATRACK RIVER ENTERPRISES Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402314
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CARDINALI, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4820 HAMPTON FARMS DRIVE
 City MARIETTA State GA Zip Code 30068-4813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397013
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CARDONE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 NECK ROAD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECOVERYPT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390257
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1510.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 732 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARDONE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 NECK ROAD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECOVERYPT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390263
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CARDONE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 NECK ROAD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECOVERYPT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413179
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CARDONE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 NECK ROAD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECOVERYPT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413194
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 733 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARDONE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 NECK ROAD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECOVERYPT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417941
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. CARDONE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 NECK ROAD
 City PONTE VEDRA BEACH State FL Zip Code 32082-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RECOVERYPT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417948
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. CAREY, STEVE, E., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 RUSSELL RD
 City ALEXANDRIA State VA Zip Code 22301-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POTOMAC STRATEGIC DEV CO Occupation (for Individual) BUSINESS DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377666
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 734 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARILL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 CHEWS LANDING ROAD
 City HADDONFIELD State NJ Zip Code 08033-3840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370902
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CARL, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6626 136TH PL SW
 City EDMONDS State WA Zip Code 98026-3240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357203
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARLILE, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1595 GARDEN OAKS
 City MARSHALL State TX Zip Code 75672-4935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CORP OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361126
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 735 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARLSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4340 FREMONT AVENUE S
 City MINNEAPOLIS State MN Zip Code 55409-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UMI COMPANY INC Occupation (for Individual) MANUFACTURING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401620
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. CARLSON, DONALD, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2401 GRAPEVINE DRIVE STE 16
 City OXNARD State CA Zip Code 93036-1575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347932
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARLSON, DONALD, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2401 GRAPEVINE DRIVE STE 16
 City OXNARD State CA Zip Code 93036-1575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360907
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 736 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARLSON, DONALD, O., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2401 GRAPEVINE DRIVE
STE 16

City OXNARD State CA Zip Code 93036-1575

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDITOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.373484

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

B. CARLSGAARD, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5111 HARVEST ESTATES

City SAN JOSE State CA Zip Code 95135-1204

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A&M INTL Occupation (for Individual) MARINE CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
07 / 22 / 2016
Transaction ID : SA11A.353876

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. CARLSGAARD, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5111 HARVEST ESTATES

City SAN JOSE State CA Zip Code 95135-1204

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A&M INTL Occupation (for Individual) MARINE CONSULTANT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
234.00

Date of Receipt
08 / 30 / 2016
Transaction ID : SA11A.384059

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 737 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARLSON, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 457
 PO BOX 457
 City ST JOSEPH State MI Zip Code 49085-0457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410096
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. CARLSON, ROYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 EASTON AVENUE
 City GENEVA State IL Zip Code 60134-3032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RD CARLSON INS AGENCY INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.394609
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CARMACK, JOHN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2264 STARBRIGHT DRIVE
 City SAN JOSE State CA Zip Code 95124-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.361154
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 738 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARMACK, JOHN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2264 STARBRIGHT DRIVE
 City SAN JOSE State CA Zip Code 95124-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406726
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CARMICHAEL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3198 PARKWOOD BOULEVARD SUITE 11076
 City FRISCO State TX Zip Code 75034-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397203
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CARMICHAEL, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 71ST ST.
 City FENVILLE State MI Zip Code 49408-9727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384432
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 739 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARMODY, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 S ALMONDELL WAY
 City THE WOODLANDS State TX Zip Code 77354-3379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349479
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CARMODY, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 S ALMONDELL WAY
 City THE WOODLANDS State TX Zip Code 77354-3379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.414196
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CARPENTER, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 S AVENUE H
 City HUMBLE State TX Zip Code 77338-4719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.396353
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 740 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CARPENTER, MAURICE, , ,

Mailing Address 6625

City GLOUCESTER	State VA	Zip Code 23061-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414838

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CARPENTER, MAURICE, , ,

Mailing Address 6625

City GLOUCESTER	State VA	Zip Code 23061-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414841

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CARPENTER, MAURICE, , ,

Mailing Address 6625

City GLOUCESTER	State VA	Zip Code 23061-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414843

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 741 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARPENTER, WILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 S WOODS MILL ROAD
 APT 2202
 City CHESTERFIELD State MO Zip Code 63017-3495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392666
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CARPINO, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16420 GINGERWOOD CT
 City GAINESVILLE State VA Zip Code 20155-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382353
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CARPINO, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16420 GINGERWOOD CT
 City GAINESVILLE State VA Zip Code 20155-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385724
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 742 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARPINO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16420 GINGERWOOD CT
City GAINESVILLE State VA Zip Code 20155-1944
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.391993
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CARPINO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16420 GINGERWOOD CT
City GAINESVILLE State VA Zip Code 20155-1944
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398582
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARPINO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16420 GINGERWOOD CT
City GAINESVILLE State VA Zip Code 20155-1944
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417910
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 743 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CARR, JOHN, , ,			Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 1875 EDGEMONT CT			Transaction ID : SA11A.370450
City CUMMING	State GA	Zip Code 30041-8055	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ARTHUR J GALLAGHER		Occupation (for Individual) INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CARR, JOHN, , ,			Date of Receipt MM / DD / YYYY 09 / 15 / 2016
Mailing Address 1875 EDGEMONT CT			Transaction ID : SA11A.398242
City CUMMING	State GA	Zip Code 30041-8055	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ARTHUR J GALLAGHER		Occupation (for Individual) INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CARR, JOHN, , ,			Date of Receipt MM / DD / YYYY 09 / 15 / 2016
Mailing Address 1875 EDGEMONT CT			Transaction ID : SA11A.398244
City CUMMING	State GA	Zip Code 30041-8055	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ARTHUR J GALLAGHER		Occupation (for Individual) INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 475.00		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 744 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARROLL, RICHARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1344 MONTEREY BOULEVARD NE
 City SAINT PETERSBURG State FL Zip Code 33704-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369358
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CARROLL, RICHARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 393 EAGLE DR
 City JUPITER State FL Zip Code 33477-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INNOVATION DEFENSE STRATEGIES Occupation (for Individual) BUSINESS CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 60000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421191
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. CARROLL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2241 CENTURY HILL
 City LOS ANGELES State CA Zip Code 90067-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 745 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARROLL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2241 CENTURY HILL
 City LOS ANGELES State CA Zip Code 90067-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390395
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CARROLL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2241 CENTURY HILL
 City LOS ANGELES State CA Zip Code 90067-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408445
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARROLL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2241 CENTURY HILL
 City LOS ANGELES State CA Zip Code 90067-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413257
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 746 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARROLL, SUZANNE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 393 EAGLE DR
 City JUPITER State FL Zip Code 33477-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421193
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. CARSON, FRANCIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2309 APPARATION CT
 City ST. GEORGE State UT Zip Code 84790-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388379
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARSON, FRANCIS, W., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2309 APPARATION CT
 City ST. GEORGE State UT Zip Code 84790-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419335
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 747 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.348036
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365059
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380522
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 748 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380525
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387482
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388606
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 749 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417559
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CARSON, STANLEY, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4191 S COLORADO BLVD
 City ENGLEWOOD State CO Zip Code 80113-5039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417561
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CARSTENS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1977 E CAMINO REAL ST
 City COLUMBUS State NE Zip Code 68601-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIK MFG., INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405022
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 750 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSTENS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1977 E CAMINO REAL ST
 City COLUMBUS State NE Zip Code 68601-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIK MFG., INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422965
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CARSTENS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1977 E CAMINO REAL ST
 City COLUMBUS State NE Zip Code 68601-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIK MFG., INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422996
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARSTENS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1977 E CAMINO REAL ST
 City COLUMBUS State NE Zip Code 68601-2853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIK MFG., INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 751 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARSTENSEN, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10007 JONES AVENUE
 City DURHAM State CA Zip Code 95938-9718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350044
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CARSTENSEN, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10007 JONES AVENUE
 City DURHAM State CA Zip Code 95938-9718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370356
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CARSTENSEN, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10007 JONES AVENUE
 City DURHAM State CA Zip Code 95938-9718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 752 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST SUITE 500
 City WICHITA FALLS State TX Zip Code 76301-8000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTER AVIATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354506
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST SUITE 500
 City WICHITA FALLS State TX Zip Code 76301-8000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTER AVIATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380020
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST SUITE 500
 City WICHITA FALLS State TX Zip Code 76301-8000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTER AVIATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382987
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 753 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST SUITE 500

City WICHITA FALLS	State TX	Zip Code 76301-8000
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER AVIATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016

Transaction ID : SA11A.408708

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CARTER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST SUITE 500

City WICHITA FALLS	State TX	Zip Code 76301-8000
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER AVIATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016

Transaction ID : SA11A.411158

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CARTER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4119 MARSHA SHARP FREEWAY

City LUBBOCK	State TX	Zip Code 79407-2416
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTTO'S GRANARY	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : SA11A.348956

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 754 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4119 MARSHA SHARP FREEWAY
 City LUBBOCK State TX Zip Code 79407-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTTO'S GRANARY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372750
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CARTER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4119 MARSHA SHARP FREEWAY
 City LUBBOCK State TX Zip Code 79407-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTTO'S GRANARY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.401017
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CARTER, KIRSTEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39461 EVERGREEN DRIVE
 City AVON State OH Zip Code 44011-2177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350403
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 755 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, KIRSTEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39461 EVERGREEN DRIVE

City AVON	State OH	Zip Code 44011-2177
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INTERIOR DESIGN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2016

Transaction ID : SA11A.376186

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CARTER, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3301 WEST END AVENUE, SUITE 200

City NASHVILLE	State TN	Zip Code 37203-6897
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER HASTON RE	Occupation (for Individual) INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.377598

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CARTER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4305 MACARTHUR AVE

City DALLAS	State TX	Zip Code 75209-6511
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARTER & COMPANY	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390501

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 756 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4305 MACARTHUR AVE
 City DALLAS State TX Zip Code 75209-6511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTER & COMPANY Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403889
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. CARTER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 MILL ROAD
 City EDGECOMB State ME Zip Code 04556-3530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359734
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CARTER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 MILL ROAD
 City EDGECOMB State ME Zip Code 04556-3530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370573
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 757 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 MILL ROAD
 City EDGECOMB State ME Zip Code 04556-3530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386877
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CARTEAUX, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5888 ECHO RIDGE
 City STEVENSVILLE State MI Zip Code 49127-1320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AEP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388292
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARTER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 W JOHNSON ST APT # 1344
 City MADISON State WI Zip Code 53703-3766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SSM HEALTH Occupation (for Individual) MEDICAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409114
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 758 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH RD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353628
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH RD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385739
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH RD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385745
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 759 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH RD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385746
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH RD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385748
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CARTER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1980 CRESCENT BEACH RD
 City MANISTEE State MI Zip Code 49660-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402738
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 760 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTLEDGE, R., E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SEAWATCH DRIVE
 City SAVANNAH State GA Zip Code 31411-2600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389074
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349742
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

C. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359967
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	515.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 761 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364148
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366613
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370708
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 762 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403935
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403937
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405634
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 763 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405635
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418703
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CARTRIGHT, WILMA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 W ARTHUR ST
 City PARIS State IL Zip Code 61944-2626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419160
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 764 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASADA, JONATHON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 WESTMINSTER DR
 City HOUSTON State TX Zip Code 77024-5623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JONATHON CUSTOM ESTATE HOMES Occupation (for Individual) HOMEBUILDERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408060
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. CASE, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9160 FM 2727
 City TERRELL State TX Zip Code 75161-8231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414697
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. CASEY, KEVIN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 BRICK MILL RD
 City BEDFORD State NH Zip Code 03110-5156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST OF MASSACHUSETTS INC. Occupation (for Individual) RSVP REGION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421196
 Amount of Each Receipt this Period 2100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 765 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL CASEY Occupation (for Individual) ENGINEER, INTEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357614
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL CASEY Occupation (for Individual) ENGINEER, INTEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.385202
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CASEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 W EL CAMINO REAL, STE 109 MB
 City SUNNYVALE State CA Zip Code 94087-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL CASEY Occupation (for Individual) ENGINEER, INTEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.413044
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 766 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 GRANDVIEW DRIVE
 City CAMARILLO State CA Zip Code 93010-7949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LENNAR Occupation (for Individual) LAND DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359202
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CASEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 GRANDVIEW DRIVE
 City CAMARILLO State CA Zip Code 93010-7949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LENNAR Occupation (for Individual) LAND DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359203
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CASEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 GRANDVIEW DRIVE
 City CAMARILLO State CA Zip Code 93010-7949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LENNAR Occupation (for Individual) LAND DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396898
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 767 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 GRANDVIEW DRIVE
 City CAMARILLO State CA Zip Code 93010-7949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LENNAR Occupation (for Individual) LAND DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396899
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CASEY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2276 GRANDVIEW DRIVE
 City CAMARILLO State CA Zip Code 93010-7949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LENNAR Occupation (for Individual) LAND DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419095
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CASEY, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3547 SAVANNAH HILLS
 City MATTHEWS State NC Zip Code 28105-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUST LAW INTERNATIONAL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5300.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353541
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 768 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASEY, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3547 SAVANNAH HILLS
 City MATTHEWS State NC Zip Code 28105-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUST LAW INTERNATIONAL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.375631
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. CASEY, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3547 SAVANNAH HILLS
 City MATTHEWS State NC Zip Code 28105-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUST LAW INTERNATIONAL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5300.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375698
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CASEY, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3547 SAVANNAH HILLS
 City MATTHEWS State NC Zip Code 28105-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUST LAW INTERNATIONAL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404213
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 769 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CASHION, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 THRASHER CT
 City GREENVILLE State SC Zip Code 29607-5558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLY OAK CHEMICAL Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357667
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. CASHIA, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2341 SALEROSO DR
 City ROWLAND HEIGHTS State CA Zip Code 91748-4182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.391124
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CASHIA, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2341 SALEROSO DR
 City ROWLAND HEIGHTS State CA Zip Code 91748-4182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405532
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 770 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 771.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346510
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 771.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352279
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 771.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357601
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 771 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CASPERSON, CAROLINA, , ,
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365151
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CASPERSON, CAROLINA, , ,
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370082
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CASPERSON, CAROLINA, , ,
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370805
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 772 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379021
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380045
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382586
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

50.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 773 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CASPERSON, CAROLINA, , ,
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383111
 Amount of Each Receipt this Period 17.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CASPERSON, CAROLINA, , ,
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385191
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CASPERSON, CAROLINA, , ,
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390632
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 167.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 774 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CASPERSON, CAROLINA, , ,

Mailing Address 1700 LINCOLN STREET,

City DENVER State CO Zip Code 80203-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
771.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.390655

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CASPERSON, CAROLINA, , ,

Mailing Address 1700 LINCOLN STREET,

City DENVER State CO Zip Code 80203-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
771.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.394544

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CASPERSON, CAROLINA, , ,

Mailing Address 1700 LINCOLN STREET,

City DENVER State CO Zip Code 80203-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
771.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2016

Transaction ID : SA11A.401418

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 775 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406276
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408206
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 771.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413104
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 776 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASPERSON, CAROLINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 LINCOLN STREET,
 City DENVER State CO Zip Code 80203-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHRISTIAN SCIENCE PRACTITIONER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **771.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418813
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. CASSENS, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 CAMP THREE LANE
 City CORVALLIS State MT Zip Code 59828-9645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383287
 Amount of Each Receipt this Period **1000.00**
 Memo Item CONTRIBUTION

C. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.356426
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 777 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400728
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400729
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD
 City BETHESDA State MD Zip Code 20817-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.411720
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 778 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD

City BETHESDA	State MD	Zip Code 20817-2048
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016

Transaction ID : SA11A.411721

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD

City BETHESDA	State MD	Zip Code 20817-2048
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016

Transaction ID : SA11A.411722

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CASSIDY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 SEDDON ROAD

City BETHESDA	State MD	Zip Code 20817-2048
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.422491

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 779 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTEEL, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1350 STATE ROUTE 88

City MINDEN	State NV	Zip Code 89423-4626
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399412

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. CASTER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1790 MARCIA OVERLOOK DR

City CUMMING	State GA	Zip Code 30041-1331
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397729

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CASTER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1790 MARCIA OVERLOOK DR

City CUMMING	State GA	Zip Code 30041-1331
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.409035

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 780 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTER, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1790 MARCIA OVERLOOK DR
 City CUMMING State GA Zip Code 30041-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CASTELLINI, SUSAN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2180 GRANDIN RD
 City CINCINNATI State OH Zip Code 45208-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391367
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. CASTER, TERENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4607 MISSION GORGE PLACE
 City SAN DIEGO State CA Zip Code 92120-4133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASTER FAMILY ENTERPRISES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399275
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	51100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 781 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTILLEJA, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 EAST 7TH STREET

City JOSEPH	State OR	Zip Code 97846-8374
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398049

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CASTILLEJA, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 EAST 7TH STREET

City JOSEPH	State OR	Zip Code 97846-8374
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398061

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CASTILLEJA, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 EAST 7TH STREET

City JOSEPH	State OR	Zip Code 97846-8374
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415234

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 782 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTILLEJA, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 EAST 7TH STREET
 City JOSEPH State OR Zip Code 97846-8374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415237
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CASTILLEJA, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 EAST 7TH STREET
 City JOSEPH State OR Zip Code 97846-8374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415243
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CASTILLEJA, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 EAST 7TH STREET
 City JOSEPH State OR Zip Code 97846-8374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415244
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 783 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 COCONUT ROW B611
 City PALM BEACH State FL Zip Code 33480-4069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASTLE HARLAN INC Occupation (for Individual) MERCHANT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.352928
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. CASTRO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5132 WESTPATH WAY
 City BETHESDA State MD Zip Code 20816-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTHOR/ INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362996
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CASTRO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5132 WESTPATH WAY
 City BETHESDA State MD Zip Code 20816-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTHOR/ INSURANCE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402326
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 784 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTRO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5132 WESTPATH WAY
 City BETHESDA State MD Zip Code 20816-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTHOR/ INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415079
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CASTRO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5132 WESTPATH WAY
 City BETHESDA State MD Zip Code 20816-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTHOR/ INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CASTRO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5132 WESTPATH WAY
 City BETHESDA State MD Zip Code 20816-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTHOR/ INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418850
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 785 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTRO, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5132 WESTPATH WAY

City BETHESDA	State MD	Zip Code 20816-2318
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTHOR/ INSRUANCE SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418871

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CASTRO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7939 CHATEAU POINT LANE

City HOUSTON	State TX	Zip Code 77041-1244
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELL	Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353789

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CASTRO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7939 CHATEAU POINT LANE

City HOUSTON	State TX	Zip Code 77041-1244
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELL	Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : SA11A.375730

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 786 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTRO, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7939 CHATEAU POINT LANE
 City HOUSTON State TX Zip Code 77041-1244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHELL Occupation (for Individual) COMMERCIAL DEVELOPMENT MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404233
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CATANESE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 N MEMORY LANE
 City WESTLAKE VILLAGE State CA Zip Code 91361-5524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394827
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CATER, BUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3756 E. FAIRWAY DRIVE
 City BIRMINGHAM State AL Zip Code 35213-4214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362410
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 787 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATER, BUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3756 E. FAIRWAY DRIVE
 City BIRMINGHAM State AL Zip Code 35213-4214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370251
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373207
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373218
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 788 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381850
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386815
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391219
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 789 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATHEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 259 HICKORY DR

City BUCHANAN	State TN	Zip Code 38222-5006
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397855

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CATHEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 259 HICKORY DR

City BUCHANAN	State TN	Zip Code 38222-5006
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397858

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CATHEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 259 HICKORY DR

City BUCHANAN	State TN	Zip Code 38222-5006
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414082

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 790 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CATHEY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 HICKORY DR
 City BUCHANAN State TN Zip Code 38222-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414086
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CATSIMATIDIS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 817 5TH AVE
 City NEW YORK State NY Zip Code 10065-7254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED REFINING Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400508
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. CATSIMATIDIS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 817 5TH AVE
 City NEW YORK State NY Zip Code 10065-7254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED REFINING Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400509
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 791 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAUDELL, MARIE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1012 ASPEN LANE

City COLUMBUS	State IN	Zip Code 47203-1035
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016
Transaction ID : SA11A.373584

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CAULFIELD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5 ALESWORTH AVENUE

City WINCHESTER	State MA	Zip Code 01890-3517
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016
Transaction ID : SA11A.368161

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CAULFIELD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5 ALESWORTH AVENUE

City WINCHESTER	State MA	Zip Code 01890-3517
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016
Transaction ID : SA11A.368163

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 792 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAULFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 ALESWORTH AVENUE
 City WINCHESTER State MA Zip Code 01890-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368166
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CAULFIELD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 ALESWORTH AVENUE
 City WINCHESTER State MA Zip Code 01890-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368167
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CAVANEY, RED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 N. LEE STREET #408
 City ALEXANDRIA State VA Zip Code 22314-3267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348898
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 793 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAVERLY, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6065 HEARTHSIDE PLACE
 City GRAND BLANC State MI Zip Code 48439-9199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-STATE CONSULTANTS Occupation (for Individual) REGIONAL VICE-PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382230
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CAVERLY, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6065 HEARTHSIDE PLACE
 City GRAND BLANC State MI Zip Code 48439-9199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-STATE CONSULTANTS Occupation (for Individual) REGIONAL VICE-PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403294
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CAVERLY, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6065 HEARTHSIDE PLACE
 City GRAND BLANC State MI Zip Code 48439-9199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-STATE CONSULTANTS Occupation (for Individual) REGIONAL VICE-PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 794 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAVICKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5849 SAGEBRUSH ROAD
 City LA JOLLA State CA Zip Code 92037-7038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422542
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CECCHI, GIUSEPPE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 ALDEBARAN DRIVE
 City MCLEAN State VA Zip Code 22101-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IDI GROUP COMPANIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389402
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

C. CECELIA, CARL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 ECHO DR
 City BURLINGTON State WI Zip Code 53105-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHPORT BANK Occupation (for Individual) EVP - CHIEF CREDIT OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353759
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10550.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 795 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CECELIA, CARL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 ECHO DR
 City BURLINGTON State WI Zip Code 53105-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHPORT BANK Occupation (for Individual) EVP - CHIEF CREDIT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375720
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CECELIA, CARL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 ECHO DR
 City BURLINGTON State WI Zip Code 53105-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHPORT BANK Occupation (for Individual) EVP - CHIEF CREDIT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404234
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CELLER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 OAK GLEN RD.
 City HOWELL State NJ Zip Code 07731-8624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381769
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 796 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CELLER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 OAK GLEN RD.
 City HOWELL State NJ Zip Code 07731-8624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417824
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CELLER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 OAK GLEN RD.
 City HOWELL State NJ Zip Code 07731-8624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417838
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CELLER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 OAK GLEN RD.
 City HOWELL State NJ Zip Code 07731-8624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417840
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 797 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CENTENARI, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8140 TELEGRAPH ROAD
 City SEVERN State MD Zip Code 21144-3204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL CENTENARI Occupation (for Individual) ATLASCONTAINER - MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409819
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CENTENARI, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8140 TELEGRAPH ROAD
 City SEVERN State MD Zip Code 21144-3204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL CENTENARI Occupation (for Individual) ATLASCONTAINER - MFG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416778
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CEO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 982 CELIA LANE
 City LEXINGTON State KY Zip Code 40504-2255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.346229
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 798 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CEO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 982 CELIA LANE
 City LEXINGTON State KY Zip Code 40504-2255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361235
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CEO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 982 CELIA LANE
 City LEXINGTON State KY Zip Code 40504-2255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365345
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. CEO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 982 CELIA LANE
 City LEXINGTON State KY Zip Code 40504-2255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387680
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 799 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CERAUL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 MARKET STREET
 City BANGOR State PA Zip Code 18013-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402705
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CERAUL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 MARKET STREET
 City BANGOR State PA Zip Code 18013-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402706
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CERAUL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 MARKET STREET
 City BANGOR State PA Zip Code 18013-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415855
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 800 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CERAUL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 MARKET STREET

City BANGOR	State PA	Zip Code 18013-1902
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415856

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CERAUL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 MARKET STREET

City BANGOR	State PA	Zip Code 18013-1902
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415862

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CHADWICK, KIRSTEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 PRESIDENT FORD LANE

City ALEXANDRIA	State VA	Zip Code 22302-3033
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIERCE GOVERNMENT RELATIONS	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422126

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 801 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHALSEN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PEACH TREE LANE
 City BRIARCLIFF MANOR State NY Zip Code 10510-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.393824
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CHAMBERLIN, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9289 MENAGGIO COURT #201
 City NAPLES State FL Zip Code 34114-9721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370093
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CHAMBERLAIN, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 WEST BIG OAK ST
 City PHOENIX State AZ Zip Code 85083-9323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374230
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 802 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAMBERLAIN, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 WEST BIG OAK ST
 City PHOENIX State AZ Zip Code 85083-9323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390461
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHAMBERLAIN, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 WEST BIG OAK ST
 City PHOENIX State AZ Zip Code 85083-9323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414229
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHAMBERLAIN, REX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33203 W HADDON CT
 City FULSHEAR State TX Zip Code 77441-4034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETWORK FUNDING Occupation (for Individual) MORTGAGE BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353563
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 803 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAMBERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 OAK KNOLL ROAD
 City BARRINGTON State IL Zip Code 60010-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B.B. GRAHAM & CO. Occupation (for Individual) SECURITIES REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362392
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CHAMBERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 OAK KNOLL ROAD
 City BARRINGTON State IL Zip Code 60010-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B.B. GRAHAM & CO. Occupation (for Individual) SECURITIES REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366744
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CHAMBERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 OAK KNOLL ROAD
 City BARRINGTON State IL Zip Code 60010-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B.B. GRAHAM & CO. Occupation (for Individual) SECURITIES REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392048
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 804 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAMPION, GEOFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2770 INDIAN RIVER BOULEVARD
 SUITE 337
 City VERO BEACH State FL Zip Code 32960-4299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHAMPION & PARTNERS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363879
 Amount of Each Receipt this Period 334.00
 Memo Item CONTRIBUTION

B. CHANDLEE, MICHENER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25900 NE BUTTEVILLE RD
 City AURORA State OR Zip Code 97002-8542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE, INC Occupation (for Individual) FINANCE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373410
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. CHANDLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16310 AXIS TRAIL
 City SAN ANTONIO State TX Zip Code 78232-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397174
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5834.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 805 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHANEY, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3273 SUMAC ROAD
 City FALLBROOK State CA Zip Code 92028-8707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 08 / 2016**
Transaction ID : SA11A.346019
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CHANG, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 OLD CHURCH LANE
 City POUND RIDGE State NY Zip Code 10576-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390789
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CHANNING, CLARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 EFFIE WAY
 City PISMO BEACH State CA Zip Code 93449-3258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 431.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.406219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 806 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAPEL, HAROLD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4667 W 21ST STREET CIRCLE

City GREELEY	State CO	Zip Code 80634-3265
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEALTHCARE PRODIDER	Occupation (for Individual) BANNER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.360976

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. CHAPEL, HAROLD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4667 W 21ST STREET CIRCLE

City GREELEY	State CO	Zip Code 80634-3265
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEALTHCARE PRODIDER	Occupation (for Individual) BANNER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2016

Transaction ID : SA11A.396968

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CHAPMAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1903 STRATHSHIRE HALL LANE

City POWELL	State OH	Zip Code 43065-7611
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.376426

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 807 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAPMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BAY FARM LANE; PO BOX5**

City **WASHINGTON ISLAND** State **WI** Zip Code **54246-0005**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **07 / 26 / 2016**

Transaction ID : SA11A.355767

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

B. CHAPMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BAY FARM LANE; PO BOX5**

City **WASHINGTON ISLAND** State **WI** Zip Code **54246-0005**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 26 / 2016**

Transaction ID : SA11A.380772

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

C. CHAPMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BAY FARM LANE; PO BOX5**

City **WASHINGTON ISLAND** State **WI** Zip Code **54246-0005**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 26 / 2016**

Transaction ID : SA11A.407952

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 808 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAPMAN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 CROWNWOOD COURT
 City DALLAS State TX Zip Code 75225-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406218
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CHAPMAN, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 160906
 City BIG SKY State MT Zip Code 59716-0906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386043
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CHAPPEL, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 E 19TH ST
 City TULSA State OK Zip Code 74120-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WILLIAMS COMPANIES. INC. Occupation (for Individual) SENIOR VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392077
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 809 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHASSE, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 EAGLE CREST DRIVE

City WAVERLY	State GA	Zip Code 31565-2381
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388490

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CHASSE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1142 CONTINENTAL AVE

City MELBOURNE	State FL	Zip Code 32940-6742
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348507

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

C. CHASSE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1142 CONTINENTAL AVE

City MELBOURNE	State FL	Zip Code 32940-6742
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350305

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 810 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357073
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359447
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

C. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362435
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 811 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370108
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379953
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382394
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 50.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 812 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391246
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

B. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394525
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

C. CHASSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 CONTINENTAL AVE
 City MELBOURNE State FL Zip Code 32940-6742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404442
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 813 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHEADLE, L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8253 W OTERO AVE

City LITTLETON	State CO	Zip Code 80128-5530
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOCKHEED MARTIN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348970

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. CHEADLE, L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8253 W OTERO AVE

City LITTLETON	State CO	Zip Code 80128-5530
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOCKHEED MARTIN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372751

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. CHEADLE, L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8253 W OTERO AVE

City LITTLETON	State CO	Zip Code 80128-5530
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOCKHEED MARTIN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399936

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 814 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CHEATHAM, BUCK, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 18 / 2016 Transaction ID : SA11A.348981
Mailing Address PO BOX 46			Amount of Each Receipt this Period 100.00
City STATESVILLE	State NC	Zip Code 28687-0046	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHEATHAM, BUCK, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 18 / 2016 Transaction ID : SA11A.372767
Mailing Address PO BOX 46			Amount of Each Receipt this Period 100.00
City STATESVILLE	State NC	Zip Code 28687-0046	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CHEATHAM, BUCK, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2016 Transaction ID : SA11A.399940
Mailing Address PO BOX 46			Amount of Each Receipt this Period 100.00
City STATESVILLE	State NC	Zip Code 28687-0046	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 815 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358048
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374417
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384166
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 816 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398490
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CHEATHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 N.W. 19TH ST.
 City OKLAHOMA CITY State OK Zip Code 73106-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANKONIT, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410304
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CHEEVER, CHARLES, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11112 MONMOUTH
 City SAN ANTONIO State TX Zip Code 78239-3142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351110
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 817 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHENEY, RICHARD, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4205 GREENS PLACE
 City WILSON State WY Zip Code 83014-9635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391350
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. CHIAVETTA, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2512 RIDGE ROAD
 City RALEIGH State NC Zip Code 27612-4714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.396096
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CHILDERS, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359938
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10559.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 818 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHILDERS, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384766
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. CHILDERS, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419583
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. CHILDERS, DICEY, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8517 JOY ROAD
 City BLOUNTSVILLE State AL Zip Code 35031-4489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354938
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 158.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 819 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CHILDERS, DICEY, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8517 JOY ROAD
 City BLOUNTSVILLE State AL Zip Code 35031-4489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354939
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. CHILDERS, DICEY, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8517 JOY ROAD
 City BLOUNTSVILLE State AL Zip Code 35031-4489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365849
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CHILDERS, DICEY, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8517 JOY ROAD
 City BLOUNTSVILLE State AL Zip Code 35031-4489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365850
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 820 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHILDERS, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4619 88TH PLACE
City KENOSHA State WI Zip Code 53142-2404
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372381
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CHILDERS, THEODORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4144 W ARRIETA CRICLE
City LA MESA State CA Zip Code 91941-7816
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395862
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CHIPMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11239 TEMPLE DRIVE
City CARMEL State IN Zip Code 46032-8859
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381439
Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 821 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CHIPMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11239 TEMPLE DRIVE
 City CARMEL State IN Zip Code 46032-8859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423152
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

B. CHISHOLM, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 OCEAN GRANDE BOULEVARD APT 805
 City JUPITER State FL Zip Code 33477-7351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387575
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CHISM, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1312 COUNTY ROAD 150
 City RIPLEY State MS Zip Code 38663-9486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357958
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 822 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHISM, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1312 COUNTY ROAD 150

City RIPLEY	State MS	Zip Code 38663-9486
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.406586

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. CHITESTER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 470 SANDSTONE CT.

City ERIE	State PA	Zip Code 16505-5812
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHITESTER CREATIVE ASSOCIATES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350094

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CHITESTER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 470 SANDSTONE CT.

City ERIE	State PA	Zip Code 16505-5812
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHITESTER CREATIVE ASSOCIATES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364900

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 823 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHITESTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 SANDSTONE CT.
 City ERIE State PA Zip Code 16505-5812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHITESTER CREATIVE ASSOCIATES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384044
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CHITESTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 SANDSTONE CT.
 City ERIE State PA Zip Code 16505-5812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHITESTER CREATIVE ASSOCIATES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396725
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CHITESTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 SANDSTONE CT.
 City ERIE State PA Zip Code 16505-5812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHITESTER CREATIVE ASSOCIATES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408599
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 824 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHITESTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 SANDSTONE CT.
 City ERIE State PA Zip Code 16505-5812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHITESTER CREATIVE ASSOCIATES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408600
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. CHITTENDEN, CAROL, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 OAK BROOK CLUB DRIVE APT N201
 City OAK BROOK State IL Zip Code 60523-8675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3000.00**

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414407
 Amount of Each Receipt this Period **2000.00**
 Memo Item CONTRIBUTION

C. CHIU, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4539 MULLENS FORD RD.
 City CHARLOTTE State NC Zip Code 28226-5038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JULIE CHIU ATTORNEY AT LAW Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.412513
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **2350.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 825 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHOATE, ARTHUR, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1390 S DIXIE HIGHWAY
 STE 2221
 City CORAL GABLES State FL Zip Code 33146-2946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARTMARINE, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361128
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CHOATE, ARTHUR, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1390 S DIXIE HIGHWAY
 STE 2221
 City CORAL GABLES State FL Zip Code 33146-2946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARTMARINE, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379676
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. CHOATE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2924 CLIFF DRIVE
 City NEWPORT BEACH State CA Zip Code 92663-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATSON LAND COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348612
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 826 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHOATE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2924 CLIFF DRIVE
 City NEWPORT BEACH State CA Zip Code 92663-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATSON LAND COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349117
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CHOATE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2924 CLIFF DRIVE
 City NEWPORT BEACH State CA Zip Code 92663-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATSON LAND COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383654
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CHOATE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2924 CLIFF DRIVE
 City NEWPORT BEACH State CA Zip Code 92663-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATSON LAND COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383658
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 827 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHOATE, JERRY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 VIA LIDO NORD
 City NEWPORT BEACH State CA Zip Code 92663-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392658
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. CHOITZ, A., H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19110 SUMMERS DRIVE
 City SOUTH BEND State IN Zip Code 46637-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.355815
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. CHORBA, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 CLEVELAND STREET
 City EVANSTON State IL Zip Code 60202-2114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.374082
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 828 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CHORBA, THOMAS, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016 Transaction ID : SA11A.414759
Mailing Address 1107 CLEVELAND STREET		Amount of Each Receipt this Period 200.00
City EVANSTON	State IL	Zip Code 60202-2114
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHRISTIE, ADRIAN, , ,		Date of Receipt MM / DD / YYYY 08 / 03 / 2016 Transaction ID : SA11A.361982
Mailing Address 1010 WEST LINCOLN ST		Amount of Each Receipt this Period 100.00
City BIRMINGHAM	State MI	Zip Code 48009-5012
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) LWA, PC	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CHRISTIE, ADRIAN, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016 Transaction ID : SA11A.384334
Mailing Address 1010 WEST LINCOLN ST		Amount of Each Receipt this Period 25.00
City BIRMINGHAM	State MI	Zip Code 48009-5012
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) LWA, PC	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 829 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTIE, ADRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 WEST LINCOLN ST
 City BIRMINGHAM State MI Zip Code 48009-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LWA, PC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415727
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CHRIST, ARLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 S. MARTHA ST
 City STILLWATER State MN Zip Code 55082-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385035
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CHRIST, ARLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 S. MARTHA ST
 City STILLWATER State MN Zip Code 55082-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414292
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 830 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRIST, ARLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 S. MARTHA ST
 City STILLWATER State MN Zip Code 55082-5619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416092
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHRISTIAN, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20230 BONNIE BRAE WAY
 City SARATOGA State CA Zip Code 95070-5900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.358473
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CHRISTENSEN, DANIEL, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 HIGH RANGE RD
 City LONDONDERRY State NH Zip Code 03053-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HANCOCK NATURAL RESOURCE GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367886
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 831 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 OLE CARRIAGE DRIVE
 City ATHENS State AL Zip Code 35613-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CDPA,PC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352501
 Amount of Each Receipt this Period 89.00
 Memo Item
CONTRIBUTION

B. CHRISTOPHER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 OLE CARRIAGE DRIVE
 City ATHENS State AL Zip Code 35613-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CDPA,PC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374153
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. CHRISTOPHER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 OLE CARRIAGE DRIVE
 City ATHENS State AL Zip Code 35613-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CDPA,PC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375974
 Amount of Each Receipt this Period 89.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	228.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 832 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTENSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7
 City ALAMO State CA Zip Code 94507-0007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILESTONE PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390862
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. CHRISTOPHER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 OLE CARRIAGE DRIVE
 City ATHENS State AL Zip Code 35613-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CDPA,PC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411947
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. CHRISTENSON, DORIS, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 ILIKAHI STREET
 City LAHAINA State HI Zip Code 96761-1149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAMA'S FISH HOUSE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358564
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 833 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, F., HUDNALL, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2837 REYNOLDS DRIVE
 City WINSTON SALEM State NC Zip Code 27104-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.406789
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. CHRISTENSEN, GERALD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 53 DR E
 City BRADENTON State FL Zip Code 34211-3759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.363380
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CHRISTENSEN, GERALD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 53 DR E
 City BRADENTON State FL Zip Code 34211-3759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374207
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 834 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CHRISTENSEN, GERALD, A., ,

Mailing Address **9618 53 DR E**

City BRADENTON	State FL	Zip Code 34211-3759
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 05 / 2016

Transaction ID : SA11A.389110

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CHRISTENSEN, GERALD, A., ,

Mailing Address **9618 53 DR E**

City BRADENTON	State FL	Zip Code 34211-3759
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 19 / 2016

Transaction ID : SA11A.399667

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CHRISTOPHER, HENRY, , ,

Mailing Address **713 CONTADORA**

City SAN ANTONIO	State TX	Zip Code 78258-4158
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 29 / 2016

Transaction ID : SA11A.357856

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 835 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 MOHAWK RD.
 City RAYNHAM State MA Zip Code 02767-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350405
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. CHRISTOPHER, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 MOHAWK RD.
 City RAYNHAM State MA Zip Code 02767-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376133
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. CHRISTOPHER, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 358 MOHAWK RD.
 City RAYNHAM State MA Zip Code 02767-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400872
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 836 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CHRISTOPHER, JOANNE, , ,

Mailing Address 358 MOHAWK RD.

City RAYNHAM State MA Zip Code 02767-5273

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11A.407753

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CHRISTOPHER, JOANNE, , ,

Mailing Address 358 MOHAWK RD.

City RAYNHAM State MA Zip Code 02767-5273

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11A.407757

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CHRISTMAN, KENNETH, , ,

Mailing Address 1626 TERRIE DRIVE

City PITTSBURGH State PA Zip Code 15241-2632

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NISOURCE CORP SERVICES CO Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : SA11A.394625

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 837 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTIANSEN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 MIRROR LANE NW

City WINTER HAVEN	State FL	Zip Code 33881-1315
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398107

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CHRISTIANSEN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 MIRROR LANE NW

City WINTER HAVEN	State FL	Zip Code 33881-1315
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398125

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CHRISTOPHER, ROBERT, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27891 N 100TH WAY

City SCOTTSDALE	State AZ	Zip Code 85262-8929
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355751

Amount of Each Receipt this Period
110.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 838 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CHRISTOPHER, ROBERT, A., MR.,

Mailing Address 27891 N 100TH WAY

City SCOTTSDALE	State AZ	Zip Code 85262-8929
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.370679

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CHRISTOPHER, ROBERT, A., MR.,

Mailing Address 27891 N 100TH WAY

City SCOTTSDALE	State AZ	Zip Code 85262-8929
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380783

Amount of Each Receipt this Period
110.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CHRISTOPHER, ROBERT, A., MR.,

Mailing Address 27891 N 100TH WAY

City SCOTTSDALE	State AZ	Zip Code 85262-8929
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398754

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 839 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403676
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHRISTOPHER, ROBERT, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27891 N 100TH WAY
 City SCOTTSDALE State AZ Zip Code 85262-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408030
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. CHRISMAN, SUSAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 SUMMERTREE COURT
 City BOSSIER CITY State LA Zip Code 71111-5452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN CHRISMAN Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349468
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 840 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHRISMAN, SUSAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 SUMMERTREE COURT
 City BOSSIER CITY State LA Zip Code 71111-5452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN CHRISMAN Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CHRISMAN, SUSAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 SUMMERTREE COURT
 City BOSSIER CITY State LA Zip Code 71111-5452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN CHRISMAN Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394171
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CHRISTOPHER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 WEST ROAD
 City NEW CANAAN State CT Zip Code 06840-3019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416322
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 841 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHSMBERS, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7970 VIA CAPRI
 City LA JOLLA State CA Zip Code 92037-4042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422162
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CHUN, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 CANON DRIVE
 City ORINDA State CA Zip Code 94563-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 593.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357591
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CHUN, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 CANON DRIVE
 City ORINDA State CA Zip Code 94563-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 593.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374925
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 842 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHUN, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 CANON DRIVE
 City ORINDA State CA Zip Code 94563-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 593.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374926
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CHUN, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 CANON DRIVE
 City ORINDA State CA Zip Code 94563-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 593.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382781
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CHUN, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 CANON DRIVE
 City ORINDA State CA Zip Code 94563-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 593.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383676
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 843 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHUN, ANGELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 CANON DRIVE

City ORINDA	State CA	Zip Code 94563-2219
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
593.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2016

Transaction ID : SA11A.401167

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. CHUN, ANGELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 CANON DRIVE

City ORINDA	State CA	Zip Code 94563-2219
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
593.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2016

Transaction ID : SA11A.413015

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. CIAMPA, DOMINICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 HILTON AVENUE
APT PH 6

City GARDEN CITY	State NY	Zip Code 11530-1564
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2016

Transaction ID : SA11A.376678

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 844 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CIAVARRA , LEA , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 RIVA RIDGE DRIVE
 City RICHMOND State TX Zip Code 77406-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344539
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. CIAVARRA , LEA , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 RIVA RIDGE DRIVE
 City RICHMOND State TX Zip Code 77406-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.347638
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CIAVARRA , LEA , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 RIVA RIDGE DRIVE
 City RICHMOND State TX Zip Code 77406-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.400345
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 132.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 845 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CIAVARRA, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 RIVA RIDGE DRIVE
 City RICHMOND State TX Zip Code 77406-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.400346
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CIAVARRA, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 RIVA RIDGE DRIVE
 City RICHMOND State TX Zip Code 77406-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411509
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CICCONI, NICHOLAS, T., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 97 HARVARD STREET
 City MALDEN State MA Zip Code 02148-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358592
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 846 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CICCONI, NICHOLAS, T., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 97 HARVARD STREET

City MALDEN	State MA	Zip Code 02148-7902
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394755

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CIGANEK, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 233 HEATH COURT

City BARRINGTON	State IL	Zip Code 60010-4822
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365202

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CLAIRE, D'ARCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 515 16TH AVENUE NE

City SAINT PETERSBURG	State FL	Zip Code 33704-4716
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369241

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 847 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAPP, DOROTHY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 DEVONSHIRE WAY
 City PALM BEACH GARDENS State FL Zip Code 33418-6874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380980
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CLAPP, DOROTHY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 DEVONSHIRE WAY
 City PALM BEACH GARDENS State FL Zip Code 33418-6874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397426
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CLARK, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 S. MONTGOMERY ST.
 City STARKVILLE State MS Zip Code 39759-3805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C. C. CLARK, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 934.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401168
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 848 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, ALMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2452 I-20 W.
 City ARLINGTON State TX Zip Code 76017-1670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AL CLARK STATE FARM Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368198
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CLARKE, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5025 GRAND AVE.
 City WESTERN SPRINGS State IL Zip Code 60558-1823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENSINGTON INTERNATIONAL Occupation (for Individual) SEARCH CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349036
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLARKE, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5025 GRAND AVE.
 City WESTERN SPRINGS State IL Zip Code 60558-1823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENSINGTON INTERNATIONAL Occupation (for Individual) SEARCH CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369070
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 849 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARKE, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5025 GRAND AVE.

City WESTERN SPRINGS	State IL	Zip Code 60558-1823
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENSINGTON INTERNATIONAL	Occupation (for Individual) SEARCH CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398788

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CLARK, BRUCE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ALAN ROAD

City DANBURY	State CT	Zip Code 06810-8362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.361894

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. CLARK, BRUCE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ALAN ROAD

City DANBURY	State CT	Zip Code 06810-8362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398129

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 850 OF 5722

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, BRUCE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ALAN ROAD

City DANBURY	State CT	Zip Code 06810-8362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11A.398141

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CLARK, BRUCE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ALAN ROAD

City DANBURY	State CT	Zip Code 06810-8362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11A.398146

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CLARK, BRUCE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 ALAN ROAD

City DANBURY	State CT	Zip Code 06810-8362
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.423032

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 851 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, BRUCE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 ALAN ROAD
 City DANBURY State CT Zip Code 06810-8362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423044
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLARK, BRUCE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 ALAN ROAD
 City DANBURY State CT Zip Code 06810-8362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423046
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD
 City ALUM BANK State PA Zip Code 15521-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 09 / 05 / 2016
Transaction ID : SA11A.390732
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 852 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) DISABLED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : SA11A.390733

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) DISABLED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

Transaction ID : SA11A.390734

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CLARK, CHAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) DISABLED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397834

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 853 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) DISABLED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.397837

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) DISABLED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.409970

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD

City ALUM BANK	State PA	Zip Code 15521-9216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) DISABLED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.409973

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 854 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD
 City ALUM BANK State PA Zip Code 15521-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412322
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD
 City ALUM BANK State PA Zip Code 15521-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412350
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. CLARK, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 SPRUCE HOLLOW ROAD
 City ALUM BANK State PA Zip Code 15521-9216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412351
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 855 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, ELLOINE, H., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3716 MAPLEWOOD AVENUE
 City DALLAS State TX Zip Code 75205-2827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11700.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.347676
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CLARK, ELMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 BOBWHITE DRIVE
 City ODESSA State TX Zip Code 79761-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359143
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLARK, ELMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 BOBWHITE DRIVE
 City ODESSA State TX Zip Code 79761-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359144
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 856 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, ELMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 BOBWHITE DRIVE
 City ODESSA State TX Zip Code 79761-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418758
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CLARK, ELMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 BOBWHITE DRIVE
 City ODESSA State TX Zip Code 79761-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418763
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CLARK, GARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6208 BELLE RIVE DRIVE
 City BRENTWOOD State TN Zip Code 37027-5616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397464
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 857 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, GARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6208 BELLE RIVE DRIVE
 City BRENTWOOD State TN Zip Code 37027-5616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414701
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. CLARK, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ACADEMY ROAD
 City STARKVILLE State MS Zip Code 39759-4047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CC CLARK. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350492
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CLARK, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ACADEMY ROAD
 City STARKVILLE State MS Zip Code 39759-4047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CC CLARK. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376104
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 858 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 ACADEMY ROAD

City STARKVILLE	State MS	Zip Code 39759-4047
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CC CLARK.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400844

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CLARK, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3105 HEISEY ST.

City BAKERSFIELD	State CA	Zip Code 93306-2320
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLARK PEST CONTROL INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357227

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. CLARK, JERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3530 T STREET NW

City WASHINGTON	State DC	Zip Code 20007-2217
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLARK ASSOCIATES ARCHITECTS	Occupation (for Individual) ARCHITECT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372213

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 859 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 PECKSLAND RD
 City GREENWICH State CT Zip Code 06831-3652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390600
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CLARK, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 PECKSLAND RD
 City GREENWICH State CT Zip Code 06831-3652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394324
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CLARK, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7675 LA JOLLA BOULEVARD UNIT 203
 City LA JOLLA State CA Zip Code 92037-4747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406910
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 860 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7576 ROCKPORT CIRCLE

City LAKE WORTH	State FL	Zip Code 33467-7306
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359949

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. CLARK, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7576 ROCKPORT CIRCLE

City LAKE WORTH	State FL	Zip Code 33467-7306
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384813

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. CLARK, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7576 ROCKPORT CIRCLE

City LAKE WORTH	State FL	Zip Code 33467-7306
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419592

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	177.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 861 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLARK, R, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4171 LORENZO FARM ROAD

City CAZENOVIA	State NY	Zip Code 13035-9341
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SULLIVAN CONSULTANTING	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 01 / 2016
Transaction ID : SA11A.358547

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. CLARK, R, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4171 LORENZO FARM ROAD

City CAZENOVIA	State NY	Zip Code 13035-9341
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SULLIVAN CONSULTANTING	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 13 / 2016
Transaction ID : SA11A.394708

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. CLARKE, THOMAS, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3911 NW GORDON ST

City PORTLAND	State OR	Zip Code 97210-1254
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIKE	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 03 / 2016
Transaction ID : SA11A.360321

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 862 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CLARY, MICHAEL, L., ,

Mailing Address **PO BOX 26**

City **OSBURN** State ID Zip Code **83849-0026**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 20 / 2016**

Transaction ID : SA11A.398471

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CLASSEN, CORYENE, R., ,

Mailing Address **9225 CASCADE AVE #1218 APT 1218**

City **WEST DES MOINES** State ID **IA** Zip Code **50266-8595**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **07 / 13 / 2016**

Transaction ID : SA11A.346207

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CLASSEN, CORYENE, R., ,

Mailing Address **9225 CASCADE AVE #1218 APT 1218**

City **WEST DES MOINES** State ID **IA** Zip Code **50266-8595**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **09 / 23 / 2016**

Transaction ID : SA11A.404893

Amount of Each Receipt this Period **75.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **675.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 863 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CLASS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 TURKEY HILL RD
 City WEST NEWBURY State MA Zip Code 01985-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348517
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CLASS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 TURKEY HILL RD
 City WEST NEWBURY State MA Zip Code 01985-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348518
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CLASS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 TURKEY HILL RD
 City WEST NEWBURY State MA Zip Code 01985-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.363919
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 864 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAWSON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 E. NEES AVE
 221
 City FRESNO State CA Zip Code 93720-0964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRESNO STATE Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352322
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CLAWSON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 E. NEES AVE
 221
 City FRESNO State CA Zip Code 93720-0964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRESNO STATE Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375865
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CLAWSON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 E. NEES AVE
 221
 City FRESNO State CA Zip Code 93720-0964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRESNO STATE Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401466
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 865 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350140
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362319
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364932
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 866 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYPOOL, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12448 BENTBROOK DRIVE

City CHESTERLAND	State OH	Zip Code 44026-2459
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIRGAS USA LLC	Occupation (for Individual) DIVISION PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1577.00

Date of Receipt
08 / 26 / 2016
Transaction ID : SA11A.380520

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CLAYPOOL, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12448 BENTBROOK DRIVE

City CHESTERLAND	State OH	Zip Code 44026-2459
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIRGAS USA LLC	Occupation (for Individual) DIVISION PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1577.00

Date of Receipt
08 / 26 / 2016
Transaction ID : SA11A.380521

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CLAYPOOL, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12448 BENTBROOK DRIVE

City CHESTERLAND	State OH	Zip Code 44026-2459
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIRGAS USA LLC	Occupation (for Individual) DIVISION PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1577.00

Date of Receipt
08 / 30 / 2016
Transaction ID : SA11A.384244

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 867 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384245
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.390878
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 17 / 2016
Transaction ID : SA11A.400073
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 868 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 17 / 2016
Transaction ID : SA11A.400074
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405779
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415822
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 869 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415831
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.418529
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CLAYPOOL, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12448 BENTBROOK DRIVE
 City CHESTERLAND State OH Zip Code 44026-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRGAS USA LLC DIVISION PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1577.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.418530
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 870 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYTON JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 N LEE ST
 City FALLS CHURCH State VA Zip Code 22046-3233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356238
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. CLAYTON JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 N LEE ST
 City FALLS CHURCH State VA Zip Code 22046-3233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383060
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. CLAYTON JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 N LEE ST
 City FALLS CHURCH State VA Zip Code 22046-3233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410997
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 871 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLAYTON JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 N LEE ST
 City FALLS CHURCH State VA Zip Code 22046-3233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411318
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. CLEMENTS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1614 NORFOLK C
 City HOUSTON State TX Zip Code 77006-5296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358356
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. CLEMENTS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1614 NORFOLK C
 City HOUSTON State TX Zip Code 77006-5296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358357
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	475.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 872 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMENTS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1614 NORFOLK
 C
 City HOUSTON State TX Zip Code 77006-5296
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417540
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CLEMENTS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1614 NORFOLK
 C
 City HOUSTON State TX Zip Code 77006-5296
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417542
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CLEMENTS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1614 NORFOLK
 C
 City HOUSTON State TX Zip Code 77006-5296
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.423153
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 873 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMENT, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6015 WILDWOOD DRIVE
 City RAPID CITY State SD Zip Code 57702-8833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.356653
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CLEMENSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6322 BLUEBIRD DR.
 City SAN ANTONIO State TX Zip Code 78240-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZACHRY EXPLORATION, LLC Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378752
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CLEMENTS, MILTON, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 GOLF CLUB EXT
 City DOUGLAS State GA Zip Code 31533-8010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.371088
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 874 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMENTE, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 CHAMBERS ST
 402
 City WOODSTOCK State GA Zip Code 30188-7911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIMROSE SCHOOLS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414180
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. CLEMONS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2195 SPRINGMEADOW DR.
 City SPRING HILL State FL Zip Code 34606-3769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349298
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CLEMONS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2195 SPRINGMEADOW DR.
 City SPRING HILL State FL Zip Code 34606-3769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359359
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 875 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMONS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2195 SPRINGMEADOW DR.
 City SPRING HILL State FL Zip Code 34606-3769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359360
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLEMONS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2195 SPRINGMEADOW DR.
 City SPRING HILL State FL Zip Code 34606-3769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.367083
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. CLEMONS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2195 SPRINGMEADOW DR.
 City SPRING HILL State FL Zip Code 34606-3769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374781
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 876 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEVELAND, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3603 THOMAS AVE

City MONTGOMERY	State AL	Zip Code 36111-2013
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.349970

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. CLEVELAND, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3603 THOMAS AVE

City MONTGOMERY	State AL	Zip Code 36111-2013
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383622

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CLEVELAND, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3603 THOMAS AVE

City MONTGOMERY	State AL	Zip Code 36111-2013
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407844

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 877 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348550
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.362948
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382845
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 878 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382846
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382847
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.387072
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 75.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 879 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390350
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403191
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CLIFTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45230 FLINTLOCK CT
 City HOLLYWOOD State MD Zip Code 20636-2860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415615
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 880 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLOUD, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18027 BISHOP AVENUE

City CARSON	State CA	Zip Code 90746-4019
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CIRRUS ENTERPRISES, LLC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409917

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CLOVIS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 EMERSON ROAD

City CLARKSBURG	State WV	Zip Code 26301-9724
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.376810

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. CLYDE, BRIGITTA, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 839 N 1400 E

City LOGAN	State UT	Zip Code 84321-3629
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414786

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 881 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLYMER, LUDWICK, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 OUTERBRIDGE CIRCLE
 City HILTON HEAD ISLAND State SC Zip Code 29926-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377693
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CLYMER, LUDWICK, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 OUTERBRIDGE CIRCLE
 City HILTON HEAD ISLAND State SC Zip Code 29926-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400438
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CO-TRUSTEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11545 N. PA BA SHAN TRAIL
 City CHARLEVOIX State MI Zip Code 49720-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379967
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 882 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CO-TRUSTEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11545 N. PA BA SHAN TRAIL
 City CHARLEVOIX State MI Zip Code 49720-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379968
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CO-TRUSTEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11545 N. PA BA SHAN TRAIL
 City CHARLEVOIX State MI Zip Code 49720-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408675
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COATES, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 MORIAH WAY
 City RYDAL State GA Zip Code 30171-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRAPHIC PACKAGING Occupation (for Individual) SR. TECH SER ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387349
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 883 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COATES, JOHN, J., MR., JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 25277

City OKLAHOMA CITY	State OK	Zip Code 73125-0277
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COATES FIELD SERVICE INC.	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2016

Transaction ID : SA11A.354231

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. COATS, BRYANT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1819 PEACHTREE RD NE STE 250

City ATLANTA	State GA	Zip Code 30309-1857
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESOURCE HOUSING GROUP	Occupation (for Individual) HOUSING EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.367971

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. COBB, ELLIOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10578 EAST CINDER CONE TRAIL

City SCOTTSDALE	State AZ	Zip Code 85262-4501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ECA MARKETING, INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2016

Transaction ID : SA11A.393752

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 884 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COBB, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 MIRAMAR LANE
 City STAMFORD State CT Zip Code 06902-8218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402949
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COBURN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BOWERMAN DR.
 City BEAVERTON State OR Zip Code 97005-0979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.352930
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. COBURN, RONALD, O., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 JESSE LANE
 City GOLDEN State CO Zip Code 80403-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357889
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 885 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COBURN, RONALD, O., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 JESSE LANE
 City GOLDEN State CO Zip Code 80403-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397114
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COCHRAN, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4436 TYNE BOULEVARD
 City NASHVILLE State TN Zip Code 37215-4550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372386
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. COCKE, DONNA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 8TH STREET
 City HERMOSA BEACH State CA Zip Code 90254-4309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357881
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 886 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COCKE, DONNA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 8TH STREET
 City HERMOSA BEACH State CA Zip Code 90254-4309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.361004
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. COCROFT, DUNCAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 195
 City BOCA GRANDE State FL Zip Code 33921-0195
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409707
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CODDINGTON, CHANDLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 OAKWOOD DR
 City MURRAY HILL State NJ Zip Code 07974-2116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTI,INC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382000
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 887 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COFFEE, HAROLD, C., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 AMBER DRIVE

City SAN FRANCISCO	State CA	Zip Code 94131-1623
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2016

Transaction ID : SA11A.396301

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. COFFEE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8020 FRANKFORT ROAD
APT 101

City DALLAS	State TX	Zip Code 75252-6859
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.381208

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. COFFEE, ROY, C., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 5TH ST NW APT 1002

City WASHINGTON	State DC	Zip Code 20001-2670
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COFFEE AND ASSOCIATES	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2016

Transaction ID : SA11A.398457

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 888 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COGAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1422 EUCLID AVENUE, STE 900
 City CLEVELAND State OH Zip Code 44115-2001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392523
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COGDELL, DABNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 PARK PLACE 2
 City CINCINNATI State OH Zip Code 45238-3599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392078
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. COGDELL, DABNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 PARK PLACE 2
 City CINCINNATI State OH Zip Code 45238-3599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402476
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 889 OF 5722
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COGDELL, DABNEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 PARK PLACE
2

City CINCINNATI	State OH	Zip Code 45238-3599
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418966

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. COGDELL, DABNEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 PARK PLACE
2

City CINCINNATI	State OH	Zip Code 45238-3599
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418970

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. COGGAN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3073 WILDWOOD LANE

City CELINA	State TX	Zip Code 75009-2815
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.365949

Amount of Each Receipt this Period
1435.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1585.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 890 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COGGIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 ALPINE DR.
 City NEWNAN State GA Zip Code 30263-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360186
 Amount of Each Receipt this Period 210.00
 Memo Item CONTRIBUTION

B. COHEE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 12TH AVE
 City MILTON State WA Zip Code 98354-6500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354530
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COHEE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 12TH AVE
 City MILTON State WA Zip Code 98354-6500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380019
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 891 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COHEE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 12TH AVE
 City MILTON State WA Zip Code 98354-6500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408699
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. COHEN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4605 S OCEAN BLVD 3C
 City HIGHLAND BEACH State FL Zip Code 33487-5323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENLEY CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.374967
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. COHN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4130 EAST 2ND ST
 City LONG BEACH State CA Zip Code 90803-5225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNCAN BOLT CO Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.362060
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 892 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COHN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4130 EAST 2ND ST
 City LONG BEACH State CA Zip Code 90803-5225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNCAN BOLT CO Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362062
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. COHN, FLORENCE, F., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 W 3RD AVENUE APT 304
 City SAN MATEO State CA Zip Code 94402-1564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369535
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355717
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 893 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 08 / 2016
Transaction ID : SA11A.391724
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 08 / 2016
Transaction ID : SA11A.391726
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 26 / 2016
Transaction ID : SA11A.407846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 894 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLBRY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205
 City FRENCHTOWN State NJ Zip Code 08825-0205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407848
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLBURN, RICHARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 SKOKIE BLVD STE 555
 City NORTHBROOK State IL Zip Code 60062-2854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYROLL & INSURANCE GROUP INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379116
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. COLDIRON, DEAN, , MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 SAINT MARK COURT
 City LOS ALTOS State CA Zip Code 94024-7040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D TECH Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378309
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 895 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLDIRON, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 MIRAMONTE AVE
 City LOS ALTOS State CA Zip Code 94024-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350558
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COLDIRON, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 MIRAMONTE AVE
 City LOS ALTOS State CA Zip Code 94024-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350559
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COLDIRON, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 MIRAMONTE AVE
 City LOS ALTOS State CA Zip Code 94024-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358316
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 896 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COLDIRON, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 MIRAMONTE AVE
 City LOS ALTOS State CA Zip Code 94024-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382445
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLDIRON, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 MIRAMONTE AVE
 City LOS ALTOS State CA Zip Code 94024-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416104
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **07 / 07 / 2016**
Transaction ID : SA11A.345970
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 897 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, MARY, ANNE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 TENBURY RD.

City LUTHERVILLE	State MD	Zip Code 21093-6340
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.348337

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. COLE, MARY, ANNE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 TENBURY RD.

City LUTHERVILLE	State MD	Zip Code 21093-6340
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.357721

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. COLE, MARY, ANNE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 TENBURY RD.

City LUTHERVILLE	State MD	Zip Code 21093-6340
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364243

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 898 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370847
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384167
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384187
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 899 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391132
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391134
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397589
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 900 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407567
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407572
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407573
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 901 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422522
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COLE, MARY, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 TENBURY RD.
 City LUTHERVILLE State MD Zip Code 21093-6340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422532
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 SOUTH DADELAND BLVD 1400
 City MIAMI State FL Zip Code 33156-7860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLE, SCOTT & KISSANE P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349645
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 902 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5172 LE DUC LANE
 City CASTLE ROCK State CO Zip Code 80108-8855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414412
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

B. COLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 GREENTREE ROAD
 City PACIFIC PALISADES State CA Zip Code 90272-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MITCHELL SILBERBERG & KNUPP, LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379775
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. COLEMAN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34522 N SCOTTSDALE RD STE 120-437
 City SCOTTSDALE State AZ Zip Code 85266-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.367010
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 903 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLEMAN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34522 N SCOTTSDALE RD
 STE 120-437
 City SCOTTSDALE State AZ Zip Code 85266-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383973
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. COLEMAN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34522 N SCOTTSDALE RD
 STE 120-437
 City SCOTTSDALE State AZ Zip Code 85266-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391302
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COLEMAN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34522 N SCOTTSDALE RD
 STE 120-437
 City SCOTTSDALE State AZ Zip Code 85266-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416255
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	505.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 904 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLEMAN, GEORGE, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 SASCO HILL RD
 City FAIRFIELD State CT Zip Code 06824-5649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 996.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362462
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COLEMAN, GEORGE, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 SASCO HILL RD
 City FAIRFIELD State CT Zip Code 06824-5649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 996.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384621
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

C. COLEMAN, GEORGE, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 SASCO HILL RD
 City FAIRFIELD State CT Zip Code 06824-5649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 996.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384622
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	278.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 905 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLEMAN, GEORGE, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 369 SASCO HILL RD

City FAIRFIELD	State CT	Zip Code 06824-5649
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
996.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384623

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

B. COLEMAN, GEORGE, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 369 SASCO HILL RD

City FAIRFIELD	State CT	Zip Code 06824-5649
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
996.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384642

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. COLEMAN, GEORGE, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 369 SASCO HILL RD

City FAIRFIELD	State CT	Zip Code 06824-5649
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
996.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394160

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	518.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 906 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COLEMAN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 WOODLAND TER
 City PITTSBURG State KS Zip Code 66762-5546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLERS INC Occupation (for Individual) PHOTOGRAPHIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364285
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. COLEMAN, KATIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 SASCO HILL ROAD
 City FAIRFIELD State CT Zip Code 06824-5649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419196
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COLEMAN, KATIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 SASCO HILL ROAD
 City FAIRFIELD State CT Zip Code 06824-5649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419198
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 907 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLARD, F., G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 51075
 City AMARILLO State TX Zip Code 79159-1075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357972
 Amount of Each Receipt this Period **500.00**
 Memo Item CONTRIBUTION

B. COLLARD, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2149 MCCORMACK LANE
 City PLACENTIA State CA Zip Code 92870-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **725.00**

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353194
 Amount of Each Receipt this Period **150.00**
 Memo Item CONTRIBUTION

C. COLLARD, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2149 MCCORMACK LANE
 City PLACENTIA State CA Zip Code 92870-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **725.00**

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368449
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 908 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLARD, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2149 MCCORMACK LANE
 City PLACENTIA State CA Zip Code 92870-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396627
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COLLARD, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2149 MCCORMACK LANE
 City PLACENTIA State CA Zip Code 92870-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405759
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. COLLARD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 CARDINAL DRIVE
 City MANKATO State MN Zip Code 56001-6747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344390
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	456.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 909 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLARD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 CARDINAL DRIVE
 City MANKATO State MN Zip Code 56001-6747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358997
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

B. COLLARD, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 CARDINAL DRIVE
 City MANKATO State MN Zip Code 56001-6747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387843
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. COLLINS, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16919 W. COYOTE TRAIL
 City SAND SPRINGS State OK Zip Code 74063-4754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381844
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	362.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 910 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16919 W. COYOTE TRAIL
 City SAND SPRINGS State OK Zip Code 74063-4754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387111
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COLLINS, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16919 W. COYOTE TRAIL
 City SAND SPRINGS State OK Zip Code 74063-4754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406328
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COLLINS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6606 BOXFORD WAY
 City BETHESDA State MD Zip Code 20817-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.353010
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 911 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6606 BOXFORD WAY
 City BETHESDA State MD Zip Code 20817-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366556
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COLLINS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6606 BOXFORD WAY
 City BETHESDA State MD Zip Code 20817-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383447
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COLLIER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 BARTON CREEK BLVD. 33
 City AUSTIN State TX Zip Code 78735-1683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353754
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 912 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 ALTAVILLE CT
 City LAS VEGAS State NV Zip Code 89138-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T3I SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396724
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. COLLINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 ALTAVILLE CT
 City LAS VEGAS State NV Zip Code 89138-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T3I SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396726
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. COLLINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 ALTAVILLE CT
 City LAS VEGAS State NV Zip Code 89138-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T3I SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405592
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 913 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 ALTAVILLE CT
 City LAS VEGAS State NV Zip Code 89138-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T3I SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405593
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COLLINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 ALTAVILLE CT
 City LAS VEGAS State NV Zip Code 89138-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T3I SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414150
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COLLINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 ALTAVILLE CT
 City LAS VEGAS State NV Zip Code 89138-6099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T3I SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414151
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 914 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLIER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 BARTON CREEK BLVD.
 33
 City AUSTIN State TX Zip Code 78735-1683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419802
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLLINS, JAMES, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 955 N BUNDY DRIVE
 City LOS ANGELES State CA Zip Code 90049-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345203
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. COLLIN, KENNETH, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2972 SAILOR AVENUE
 City VENTURA State CA Zip Code 93001-4156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364466
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 915 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333. LAKE VALLEY DR
 City FRANKLIN State TN Zip Code 37069-4652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2016
Transaction ID : SA11A.345895
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COLLINS, M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333. LAKE VALLEY DR
 City FRANKLIN State TN Zip Code 37069-4652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365643
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COLLINS, M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333. LAKE VALLEY DR
 City FRANKLIN State TN Zip Code 37069-4652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387942
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 916 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 LAKE VALLEY DRIVE
 City FRANKLIN State TN Zip Code 37069-4652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417169
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. COLLINS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14841 JONATHAN HARBOUR
 City FORT MYERS State FL Zip Code 33908-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EYE SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384825
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COLLINS, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4000 TOWN CTR SUITE 909
 City SOUTHFIELD State MI Zip Code 48075-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381329
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 917 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 DORCAS AVENUE
 City CARIBOU State ME Zip Code 04736-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396445
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COLLINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1642 MONTANE DRIVE E
 City GOLDEN State CO Zip Code 80401-8092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365930
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. COLLINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1642 MONTANE DRIVE E
 City GOLDEN State CO Zip Code 80401-8092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377033
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 918 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, ROBERT, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5931 LA JOLLA MESA DRIVE
 City LA JOLLA State CA Zip Code 92037-7813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406701
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COLLINS, THELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6615
 City LUBBOCK State TX Zip Code 79493-6615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344385
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COLLINS, THELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6615
 City LUBBOCK State TX Zip Code 79493-6615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 24 / 2016
Transaction ID : SA11A.354568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 919 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLLINS, THELBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 6615

City LUBBOCK	State TX	Zip Code 79493-6615
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11A.378727

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

B. COLLINS, THELBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 6615

City LUBBOCK	State TX	Zip Code 79493-6615
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : SA11A.388011

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. COLLINS, THELBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 6615

City LUBBOCK	State TX	Zip Code 79493-6615
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : SA11A.388012

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 920 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLOGNA, RUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LUMMI KEY
 City BELLEVUE State WA Zip Code 98006-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.397519
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. COLOGNA, RUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LUMMI KEY
 City BELLEVUE State WA Zip Code 98006-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.411972
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COLOGNA, RUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LUMMI KEY
 City BELLEVUE State WA Zip Code 98006-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.411973
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 921 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COLOGNA, RUDY, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 34 LUMMI KEY		Transaction ID : SA11A.415183
City BELLEVUE	State WA	Zip Code 98006-1016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. COLON-ESCOBAR, TAMI, , ,		Date of Receipt MM / DD / YYYY 07 / 09 / 2016
Mailing Address 112 ROLLING RIDGE DR.		Transaction ID : SA11A.346691
City DEL RIO	State TX	Zip Code 78840-2102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. COLON-ESCOBAR, TAMI, , ,		Date of Receipt MM / DD / YYYY 08 / 09 / 2016
Mailing Address 112 ROLLING RIDGE DR.		Transaction ID : SA11A.363912
City DEL RIO	State TX	Zip Code 78840-2102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 922 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLON-ESCOBAR, TAMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ROLLING RIDGE DR.
 City DEL RIO State TX Zip Code 78840-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392136
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLTHARP, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2105 NORTH 21ST ROAD
 City ARLINGTON State VA Zip Code 22201-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST Occupation (for Individual) EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349615
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COLTON, ELMO, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 E. 5600 S. APT 302
 City MURRAY State UT Zip Code 84121-4653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377908
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 923 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COLTON, ELMO, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 E. 5600 S. APT 302
 City MURRAY State UT Zip Code 84121-4653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394818
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COLTON, ELMO, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 E. 5600 S. APT 302
 City MURRAY State UT Zip Code 84121-4653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414241
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COLTON, ELMO, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 E. 5600 S. APT 302
 City MURRAY State UT Zip Code 84121-4653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414243
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 924 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COMER, BLAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 WEST 100 NORTH
 City LEHI State UT Zip Code 84043-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CIVIL SCIENCE INC CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 09 / 16 / 2016
Transaction ID : SA11A.398540
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. COMER, BLAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 WEST 100 NORTH
 City LEHI State UT Zip Code 84043-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CIVIL SCIENCE INC CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404771
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. COMER, JUANITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2871 W 900 S
 City FAIRMOUNT State IN Zip Code 46928-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.397187
 Amount of Each Receipt this Period
 350.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 925 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COMER, ROBERT, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24608 A BRIGHTON DRIVE
 City VALENCIA State CA Zip Code 91355-3771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRINT BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406718
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CONAN, ALFRED, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 473
 City NEWTOWN SQUARE State PA Zip Code 19073-0473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELMONT UTILITIES INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.356858
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CONDREY, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 33723
 City RALEIGH State NC Zip Code 27636-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL FN Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346076
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 926 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONKLIN, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7211 BELLA GARDEN

City SAN ANTONIO	State TX	Zip Code 78256-2124
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAA	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.360261

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. CONLON, MARY, K., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4181 BRANDONMORE DRIVE

City CINCINNATI	State OH	Zip Code 45255-3705
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KETL TOAL	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409556

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CONNEALY, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2108 W 114TH STREET

City LEAWOOD	State KS	Zip Code 66211-3060
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FINANCIAL CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.348115

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 927 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351032
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351036
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384183
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 928 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394330
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394331
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 929 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403001
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. CONNOR, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445-7726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417723
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. CONROY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 DESMOND AVE
 City WATERTOWN State MA Zip Code 02472-1704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416834
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 930 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONROY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 DESMOND AVE
 City WATERTOWN State MA Zip Code 02472-1704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416841
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. CONSOLVER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2208 NORTHCREST DRIVE
 City PLANO State TX Zip Code 75075-8354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388777
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. CONSOLVER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2208 NORTHCREST DRIVE
 City PLANO State TX Zip Code 75075-8354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418094
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 931 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CONSTABLE, SANDRA, , MS.,

Mailing Address **3801 FUCHSIA CIRCLE**

City SEAL BEACH	State CA	Zip Code 90740-2907
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
07 / 29 / 2016

Transaction ID : SA11A.358038

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CONSTABLE, SANDRA, , MS.,

Mailing Address **3801 FUCHSIA CIRCLE**

City SEAL BEACH	State CA	Zip Code 90740-2907
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 16 / 2016

Transaction ID : SA11A.370824

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CONSTABLE, SANDRA, , MS.,

Mailing Address **3801 FUCHSIA CIRCLE**

City SEAL BEACH	State CA	Zip Code 90740-2907
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.376327

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 932 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONSTABLE, SANDRA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 FUCHSIA CIRCLE

City SEAL BEACH	State CA	Zip Code 90740-2907
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398071

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CONSTABLE, SANDRA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 FUCHSIA CIRCLE

City SEAL BEACH	State CA	Zip Code 90740-2907
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398072

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CONTINI, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 443 SENECA AVENUE SW

City NEW PHILADELPHIA	State OH	Zip Code 44663-9391
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407082

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 933 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONTI, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2134 GRANDEUR DRIVE
 City GIBSONIA State PA Zip Code 15044-7498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EQT Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368185
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. CONTI, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2134 GRANDEUR DRIVE
 City GIBSONIA State PA Zip Code 15044-7498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EQT Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399441
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. CONVEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 OXFORD ROAD
 City MANHASSET State NY Zip Code 11030-2508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEUTSCHE BANK Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400476
 Amount of Each Receipt this Period 650.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 934 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONWAY, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2605 WESTLAKE DR.

City AUSTIN	State TX	Zip Code 78746-2924
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RESTAURANT OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350002

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CONWAY, LINDA, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 PAYSON ROAD

City BELMONT	State MA	Zip Code 02478-3403
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FINANCIAL CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380399

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CONWAY, LINDA, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 PAYSON ROAD

City BELMONT	State MA	Zip Code 02478-3403
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FINANCIAL CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.409054

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 935 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONWAY, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8834 MAYFIELD DRIVE
 City CHESTERLAND State OH Zip Code 44026-2690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364385
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CONWAY, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32400 FAIRMOUNT BOULEVARD
 City CLEVELAND State OH Zip Code 44124-4830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377608
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. COOGAN JR, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2742 LIVE OAK LANE
 City MIDLOTHIAN State VA Zip Code 23113-3100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370854
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 936 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOGAN JR, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2742 LIVE OAK LANE
 City MIDLOTHIAN State VA Zip Code 23113-3100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413288
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COOGAN JR, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2742 LIVE OAK LANE
 City MIDLOTHIAN State VA Zip Code 23113-3100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413290
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COOK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 SUGAR CREEK PL
 City WACO State TX Zip Code 76712-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374336
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 937 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 SUGAR CREEK PL
 City WACO State TX Zip Code 76712-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397637
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COOK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 SUGAR CREEK PL
 City WACO State TX Zip Code 76712-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399643
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COOK, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 972 ELM COURT
 City NAPERVILLE State IL Zip Code 60540-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CB&I Occupation (for Individual) HSE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.353900
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 938 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 972 ELM COURT
 City NAPERVILLE State IL Zip Code 60540-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CB&I Occupation (for Individual) HSE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421958
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICAL DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353309
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICAL DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375680
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 939 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICAL DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386511
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. COOK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10125 WHISPER POINTE DRIVE
 City TAMPA State FL Zip Code 33647-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFFUSION PHARMACEUTICALS Occupation (for Individual) PHARMACEUTICAL DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.404240
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354462
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 940 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 08 / 03 / 2016
Transaction ID : SA11A.362575
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383896
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383902
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 941 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397809
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415117
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. COOK, IDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 CLARK STREET
 City OVIEDO State FL Zip Code 32765-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415119
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 942 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 N. PROVENCE LANE H-3
 City LEHI State UT Zip Code 84043-5149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404006
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COOK, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 N. PROVENCE LANE H-3
 City LEHI State UT Zip Code 84043-5149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417862
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COOK, JERRY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 EAST AVE
 City RIFLE State CO Zip Code 81650-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354924
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 943 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68004 S BADGER CANYON ROAD
 City PROSSER State WA Zip Code 99350-9487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381363
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COOK, SUZANNE, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 DARROW DR.
 City PENNINGTON State NJ Zip Code 08534-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403118
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COOK, SUZANNE, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 DARROW DR.
 City PENNINGTON State NJ Zip Code 08534-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403122
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 944 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, SUZANNE, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 DARROW DR.
 City PENNINGTON State NJ Zip Code 08534-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403144
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. COOK, SUZANNE, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 DARROW DR.
 City PENNINGTON State NJ Zip Code 08534-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403155
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. COOK, SUZANNE, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 DARROW DR.
 City PENNINGTON State NJ Zip Code 08534-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403159
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 945 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOK, THOMAS, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 ASPEN DRIVE
 City WOODSTOCK State IL Zip Code 60098-6901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411842
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. COOK, THOMAS, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 ASPEN DRIVE
 City WOODSTOCK State IL Zip Code 60098-6901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416015
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. COOK, THOMAS, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 ASPEN DRIVE
 City WOODSTOCK State IL Zip Code 60098-6901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416016
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 946 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOLEY, DONALD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 PECKHAM ROAD
 City WATSONVILLE State CA Zip Code 95076-9747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362848
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352394
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COONEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 N. CAMPBELL AVE
 City TUCSON State AZ Zip Code 85718-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375949
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 947 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COONEY, SHIRLEY, , ,

Mailing Address **5710 N. CAMPBELL AVE**

City TUCSON	State AZ	Zip Code 85718-4218
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.401386

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COOPER, JR., J., , ,

Mailing Address **743 LOCHMOOR BLVD.**

City GROSSE POINTE WOOD	State MI	Zip Code 48236-4008
-----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREAT LAKES WINE & SPIRITS	Occupation (for Individual) BOARD MEMBER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
09 / 19 / 2016

Transaction ID : SA11A.399422

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COOPER, KATHLEEN, B., MRS.,

Mailing Address **5714 DEL ROY DRIVE**

City DALLAS	State TX	Zip Code 75230-2966
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.410243

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 948 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOPER, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 FOUR LEAF MNR
 City REXFORD State NY Zip Code 12148-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379652
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COOPER, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 FOUR LEAF MNR
 City REXFORD State NY Zip Code 12148-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389807
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COOPER, ROBERT, M., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4556 N VILLA RIDGE WAY
 City BOISE State ID Zip Code 83703-4753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. LUKE'S REG MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400413
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 949 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COORS, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 770 HIGH ST
City DENVER State CO Zip Code 80218-3698
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MILLER COORS Occupation (for Individual) BREWING MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367902
Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. COPE, JAMES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address N57W30614 STEVENS ROAD
City HARTLAND State WI Zip Code 53029-9378
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) WALKER & DUNLOP Occupation (for Individual) MORTGAGE BANKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385219
Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. COPELAND, SHIRLEY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 368 BENTLEYVILLE RD
City CHAGRIN FALLS State OH Zip Code 44022-2433
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) JENSEN TRAVELOM Occupation (for Individual) OWNER TRAVEL AGENCY
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379810
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 30050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 950 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COPELAND, SHIRLEY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 368 BENTLEYVILLE RD

City CHAGRIN FALLS	State OH	Zip Code 44022-2433
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JENSEN TRAVELOM	Occupation (for Individual) OWNER TRAVEL AGENCY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384834

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. COPELAND, SHIRLEY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 368 BENTLEYVILLE RD

City CHAGRIN FALLS	State OH	Zip Code 44022-2433
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JENSEN TRAVELOM	Occupation (for Individual) OWNER TRAVEL AGENCY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394502

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. COPELAND, SHIRLEY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 368 BENTLEYVILLE RD

City CHAGRIN FALLS	State OH	Zip Code 44022-2433
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JENSEN TRAVELOM	Occupation (for Individual) OWNER TRAVEL AGENCY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403546

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 951 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COPELAND, SHIRLEY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 368 BENTLEYVILLE RD
 City CHAGRIN FALLS State OH Zip Code 44022-2433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JENSEN TRAVELOM Occupation (for Individual) OWNER TRAVEL AGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403574
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. COPELIN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 BROOKS STREET
 City SUGAR LAND State TX Zip Code 77478-3234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COPELIN FINANCIAL ADVISORS INC Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373489
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. COPLEY, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 HEMLOCK DRIVE
 City CUMBERLAND State ME Zip Code 04021-4052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YORK CO COMMUNITY COLLEGE Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369379
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 952 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COPPLE, KENNETH, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6650 E COUNTY ROAD 40
 City FORT COLLINS State CO Zip Code 80525-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376494
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COPPLE, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6205 ORCHARD PARK DRIVE
 City FRISCO State TX Zip Code 75034-5125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.348333
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COPPLE, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6205 ORCHARD PARK DRIVE
 City FRISCO State TX Zip Code 75034-5125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388363
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 953 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 MAJORCA PL
 City VERO BEACH State FL Zip Code 32967-7257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368899
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CORBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 MAJORCA PL
 City VERO BEACH State FL Zip Code 32967-7257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390400
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CORBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 MAJORCA PL
 City VERO BEACH State FL Zip Code 32967-7257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.398659
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 954 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORBETT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 MAJORCA PL
 City VERO BEACH State FL Zip Code 32967-7257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CORCORAN, CHARLES, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533. BEAUFORT DRIVE
 City FULTON State MD Zip Code 20759-9633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351996
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CORCORAN, CHARLES, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533. BEAUFORT DRIVE
 City FULTON State MD Zip Code 20759-9633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375838
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 955 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385935

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385937

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CORCORAN, CHARLES, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533. BEAUFORT DRIVE

City FULTON	State MD	Zip Code 20759-9633
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.387070

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 956 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORCORAN, CHARLES, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533. BEAUFORT DRIVE
 City FULTON State MD Zip Code 20759-9633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387567
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CORCORAN, CHARLES, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533. BEAUFORT DRIVE
 City FULTON State MD Zip Code 20759-9633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401421
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CORDON, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 SPRING MARSH LANE
 City SAINT PAUL State MN Zip Code 55127-2011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358780
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 957 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344346
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353758
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358998
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	218.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 958 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370580
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387848
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400244
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	259.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 959 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409517
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CORLEY, IVY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 RIVERWOOD
 City BOERNE State TX Zip Code 78006-5788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412276
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CORNAN, KATHERINE, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 E VICTORIA STREET SUITE L
 City SANTA BARBARA State CA Zip Code 93101-6008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.395944
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 960 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORNBLATT, SYLVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 364
 City OWINGS MILLS State MD Zip Code 21117-0364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403672
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357468
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382763
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 961 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORNELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WAUBAUNUQUA TRAIL
 City DE PERE State WI Zip Code 54115-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC CHEESE Occupation (for Individual) V/P INDUSTRY RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413010
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CORNELL, S., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 HENDRIE ROAD
 City METAMORA State MI Zip Code 48455-9642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381337
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PI INTERNATIONAL Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390479
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 962 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI INTERNATIONAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405138
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. CORRELLO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STONE COMMONS
 City YAPHANK State NY Zip Code 11980-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PI INTERNATIONAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405146
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. CORRIGAN, PAUL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26980 CRESTWOOD DRIVE
 City FRANKLIN State MI Zip Code 48025-1378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CORRIGAN MOVING SYSTEMS CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397289
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 963 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORRIGAN, PAUL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26980 CRESTWOOD DRIVE
 City FRANKLIN State MI Zip Code 48025-1378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORRIGAN MOVING SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401348
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CORRIGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ARIANA DRIVE
 City OAKTON State VA Zip Code 22124-1848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.367118
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CORS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3846 SAINT KITTS CT
 City PUNTA GORDA State FL Zip Code 33950-8124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374871
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 964 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORTS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1075 CREST VALLEY DR.
UNIT B

City ATLANTA	State GA	Zip Code 30327-4669
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2016

Transaction ID : SA11A.354662

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CORTS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1075 CREST VALLEY DR.
UNIT B

City ATLANTA	State GA	Zip Code 30327-4669
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.376317

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CORTS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1075 CREST VALLEY DR.
UNIT B

City ATLANTA	State GA	Zip Code 30327-4669
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.377440

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 965 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CORTS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1075 CREST VALLEY DR.
 UNIT B
 City ATLANTA State GA Zip Code 30327-4669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405125
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CORWIN, PHILIP, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5151 ROCKLEDGE DR
 City CLARENCE State NY Zip Code 14031-2441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALKING PHONE BANK Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.383554
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. COSENZA, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 EAST MAIN STREET
 SUITE1A
 City BABYLON State NY Zip Code 11702-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348763
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 966 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COSENZA, GIL, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 133 EAST MAIN STREET SUITE1A		Transaction ID : SA11A.382407
City BABYLON	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.00
Name of Employer (for Individual) STATE FARM	Occupation (for Individual) AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. COSENZA, GIL, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 133 EAST MAIN STREET SUITE1A		Transaction ID : SA11A.382408
City BABYLON	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) STATE FARM	Occupation (for Individual) AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. COSENZA, GIL, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 133 EAST MAIN STREET SUITE1A		Transaction ID : SA11A.382411
City BABYLON	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) STATE FARM	Occupation (for Individual) AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 238.00	

SUBTOTAL of Receipts This Page (optional).....▶	118.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 967 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSENZA, GIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 133 EAST MAIN STREET
SUITE1A

City BABYLON State NY Zip Code 11702-3517

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM Occupation (for Individual) AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.382412

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. COSGROVE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 OAKWOOD LANE

City RUMSON State NJ Zip Code 07760-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLKIE FARR Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.388662

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. COSGROVE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 CAMBRIDGE COURT

City NEW ROCHELLE State NY Zip Code 10804-1020

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348697

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 968 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSGROVE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 CAMBRIDGE COURT

City NEW ROCHELLE	State NY	Zip Code 10804-1020
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387804

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. COSGROVE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 CAMBRIDGE COURT

City NEW ROCHELLE	State NY	Zip Code 10804-1020
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405209

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. COSTANTINO, BECKY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 FAIRWAY DR.

City DOUGLAS	State WY	Zip Code 82633-9515
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387238

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 969 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380413
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.414330
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. COSTA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SERRAMONTE CT
 City HENDERSON State NV Zip Code 89074-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.414331
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 970 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTA, S. CHRISTOPHER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1206 CLEARFIELD CIRCLE
 City LUTHERVILLE State MD Zip Code 21093-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.348336
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COSTELLO, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1252
 City CARMEL State CA Zip Code 93921-1252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350965
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COSTELLO, PAUL, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 TULLAMORE DRIVE
 City WEST CHESTER State PA Zip Code 19382-7065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 971 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTELLO, PAUL, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 TULLAMORE DRIVE
 City WEST CHESTER State PA Zip Code 19382-7065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417778
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COSTIN, GEORGETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 BEULAH DR
 City LA CANADA FLINTRID State CA Zip Code 91011-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350526
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COSTIN, GEORGETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 BEULAH DR
 City LA CANADA FLINTRID State CA Zip Code 91011-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357485
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 972 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COSTIN, GEORGETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 BEULAH DR
 City LA CANADA FLINTRID State CA Zip Code 91011-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382724
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COSTIN, GEORGETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 BEULAH DR
 City LA CANADA FLINTRID State CA Zip Code 91011-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392699
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COSTIN, GEORGETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 BEULAH DR
 City LA CANADA FLINTRID State CA Zip Code 91011-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.413073
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 973 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COTE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 POST ISLAND ROAD
 City QUINCY State MA Zip Code 02169-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373220
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COTE, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BUNJKER HILL COURT
 City CHARLESTOWN State MA Zip Code 02129-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GORDON BROTHERS GROUP Occupation (for Individual) RETAIL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356188
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COTE, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BUNJKER HILL COURT
 City CHARLESTOWN State MA Zip Code 02129-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GORDON BROTHERS GROUP Occupation (for Individual) RETAIL CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406121
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 974 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COTHRUN, JUDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79386 CETRINO DR.
 City LA QUINTA State CA Zip Code 92253-6576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348888
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. COTHRUN, JUDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79386 CETRINO DR.
 City LA QUINTA State CA Zip Code 92253-6576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370049
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COTHRUN, JUDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79386 CETRINO DR.
 City LA QUINTA State CA Zip Code 92253-6576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410813
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 975 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COTTON, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 MINNEAPOLIS AVENUE
 City MINNETRISTA State MN Zip Code 55364-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELOITTE LLP Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390866
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT
 City HAMILTON State OH Zip Code 45013-5818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346914
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT
 City HAMILTON State OH Zip Code 45013-5818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356192
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 976 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT
 City HAMILTON State OH Zip Code 45013-5818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384065
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT
 City HAMILTON State OH Zip Code 45013-5818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412107
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COUCH, ANGELA, AHRENDTS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 LIONS PEAK LN
 City SAN MARTIN State CA Zip Code 95046-9478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE Occupation (for Individual) SVP OF RETAIL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346089
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 5600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 977 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUCH, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 511 GOODHILL ROAD

City KENTFIELD	State CA	Zip Code 94904-2615
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.378401

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. COUCH, THERESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3035 LAKE BLUFF DRIVE

City DECATUR	State IL	Zip Code 62521-4834
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354094

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

C. COUGHLAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 5TH AVE S , STE 201
STE 201

City NAPLES	State FL	Zip Code 34102-6407
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352187

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 978 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUGHLAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 5TH AVE S , STE 201
 STE 201
 City NAPLES State FL Zip Code 34102-6407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.408096
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. COUGHLAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 5TH AVE S , STE 201
 STE 201
 City NAPLES State FL Zip Code 34102-6407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.408097
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. COUGHLIN, SHAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 UPLAND DRIVE
 City ALEXANDRIA State VA Zip Code 22310-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHAWN COUGHLIN Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391684
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 979 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUGHLIN, SHAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 UPLAND DRIVE
 City ALEXANDRIA State VA Zip Code 22310-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHAWN COUGHLIN Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COUGHLIN, SHAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 UPLAND DRIVE
 City ALEXANDRIA State VA Zip Code 22310-1331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHAWN COUGHLIN Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398261
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COULSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 ALHAMBRA CIRCLE
 City CORAL GABLES State FL Zip Code 33134-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENBERG TRAURIG Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369239
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 980 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COULSON, PAUL, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6048 E BRIARWOOD CIRCLE

City CENTENNIAL	State CO	Zip Code 80112-1024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.396322

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. COULSON, PAUL, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6048 E BRIARWOOD CIRCLE

City CENTENNIAL	State CO	Zip Code 80112-1024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414438

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. COUNTS, D, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 EVITT CT

City SEVERNA PARK	State MD	Zip Code 21146-2007
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383871

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 981 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUNTS, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 EVITT CT
 City SEVERNA PARK State MD Zip Code 21146-2007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402892
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COUNTS, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 EVITT CT
 City SEVERNA PARK State MD Zip Code 21146-2007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402915
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349959
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 982 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359717
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362609
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373202
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 983 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387185
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396876
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. COUNTS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 METROPOLITAN AVE.
 City OKLAHOMA CITY State OK Zip Code 73108-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDID COLOR SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414355
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 984 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COUNTRYMAN, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 IVY FALLS AVENUE
 City SAINT PAUL State MN Zip Code 55118-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358602
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. COURTE, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 LOFTY MAPLE TRL
 City KINGWOOD State TX Zip Code 77345-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1497.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344406
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

C. COURTE, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 LOFTY MAPLE TRL
 City KINGWOOD State TX Zip Code 77345-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1497.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348243
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 797.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 985 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

A. COURTE, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 LOFTY MAPLE TRL
 City KINGWOOD State TX Zip Code 77345-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1497.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359437
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COURTE, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 LOFTY MAPLE TRL
 City KINGWOOD State TX Zip Code 77345-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1497.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362171
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COURTE, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 LOFTY MAPLE TRL
 City KINGWOOD State TX Zip Code 77345-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1497.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366838
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 986 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COURTE, ELLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1719 LOFTY MAPLE TRL

City KINGWOOD	State TX	Zip Code 77345-1937
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1497.00

Date of Receipt
08 / 16 / 2016
Transaction ID : SA11A.369058

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. COURTE, ELLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1719 LOFTY MAPLE TRL

City KINGWOOD	State TX	Zip Code 77345-1937
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1497.00

Date of Receipt
08 / 24 / 2016
Transaction ID : SA11A.378901

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. COURTE, ELLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1719 LOFTY MAPLE TRL

City KINGWOOD	State TX	Zip Code 77345-1937
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1497.00

Date of Receipt
09 / 01 / 2016
Transaction ID : SA11A.387794

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 987 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COURTE, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 LOFTY MAPLE TRL
 City KINGWOOD State TX Zip Code 77345-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1497.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394273
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COURTE, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 LOFTY MAPLE TRL
 City KINGWOOD State TX Zip Code 77345-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1497.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415638
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. COURTNEY, PATRICIA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22850 SW 134 AVENUE
 City MIAMI State FL Zip Code 33170-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOGAN LOVELLS US LLP Occupation (for Individual) LEGAL SECRETARY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410570
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 505.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 988 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COURTNEY, PATRICIA, A., ,
 Mailing Address 22850 SW 134 AVENUE
 City MIAMI State FL Zip Code 33170-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOGAN LOVELLS US LLP Occupation (for Individual) LEGAL SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410571
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COURTNEY, PATRICIA, A., ,
 Mailing Address 22850 SW 134 AVENUE
 City MIAMI State FL Zip Code 33170-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOGAN LOVELLS US LLP Occupation (for Individual) LEGAL SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410572
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COURTNEY, PATRICIA, A., ,
 Mailing Address 22850 SW 134 AVENUE
 City MIAMI State FL Zip Code 33170-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOGAN LOVELLS US LLP Occupation (for Individual) LEGAL SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410614
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 136.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 989 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COURTNEY, PATRICIA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22850 SW 134 AVENUE

City MIAMI	State FL	Zip Code 33170-7313
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOGAN LOVELLS US LLP	Occupation (for Individual) LEGAL SECRETARY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411598

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. COUSINO, BRENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 EXMOOR

City OTTAWA HILLS	State OH	Zip Code 43615-2174
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.373475

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. COVEY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1436 E PARK LN

City SPOKANE	State WA	Zip Code 99203-3732
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367932

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 990 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2444 BALDWIN ROAD
 City CLEVELAND State OH Zip Code 44104-2505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358904
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. COWAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8128 STRATFORD DR
 City CLAYTON State MO Zip Code 63105-3708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENBRIER Occupation (for Individual) INTERNATIONAL PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384348
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. COWAN, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1861 MORNINGSIDE DRIVE SE
 City GRAND RAPIDS State MI Zip Code 49506-5120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.353952
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 991 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COWAN, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1861 MORNINGSIDE DRIVE SE
 City GRAND RAPIDS State MI Zip Code 49506-5120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388608
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COWAN, ROBERT, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 S LEWIS STREET
 City ANAHEIM State CA Zip Code 92805-6718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINA LANDSCAPE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.411800
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. COWART, DAVID, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1277 HIDE A WAY LANE
 City LAKE OSWEGO State OR Zip Code 97034-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.381553
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 992 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COWDREY, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 OLSEN BLVD.

City AMARILLO	State TX	Zip Code 79109-3020
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R.B. ENTERTAINMENT INC.	Occupation (for Individual) G.M.
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
07 / 02 / 2016

Transaction ID : SA11A.344240

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. COWDREY, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 OLSEN BLVD.

City AMARILLO	State TX	Zip Code 79109-3020
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R.B. ENTERTAINMENT INC.	Occupation (for Individual) G.M.
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2016

Transaction ID : SA11A.360150

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. COWDREY, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 OLSEN BLVD.

City AMARILLO	State TX	Zip Code 79109-3020
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R.B. ENTERTAINMENT INC.	Occupation (for Individual) G.M.
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
09 / 02 / 2016

Transaction ID : SA11A.389311

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 993 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. COWHERD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 CIRCUIT RIDER LANE
 City GREEN COVE SPRINGS State FL Zip Code 32043-9516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400383
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. COWHERD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 CIRCUIT RIDER LANE
 City GREEN COVE SPRINGS State FL Zip Code 32043-9516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406828
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. COX, BARRY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1218 TAM O SHANTER DRIVE
 City MOUNT VERNON State IN Zip Code 47620-8202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAREHOUSE SERVICES INC Occupation (for Individual) PRESIDEN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392902
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 994 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14012 BRIDGE AVE.

City MADILL	State OK	Zip Code 73446-8422
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349399

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. COX, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14012 BRIDGE AVE.

City MADILL	State OK	Zip Code 73446-8422
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388118

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. COX, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14012 BRIDGE AVE.

City MADILL	State OK	Zip Code 73446-8422
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400062

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 995 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, CLIFFORD, C., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 CEDAR HEIGHTS DRIVE
 City THOUSAND OAKS State CA Zip Code 91360-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409352
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COX, CLIFFORD, C., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 CEDAR HEIGHTS DRIVE
 City THOUSAND OAKS State CA Zip Code 91360-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409358
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COX, CLIFFORD, C., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 CEDAR HEIGHTS DRIVE
 City THOUSAND OAKS State CA Zip Code 91360-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410268
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 996 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 SOMBRILLO COURT
APT 107

City LOS ALAMOS State NM Zip Code 87544-4209

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.373858

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. COX, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 SOMBRILLO COURT
APT 107

City LOS ALAMOS State NM Zip Code 87544-4209

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
09 / 27 / 2016
Transaction ID : SA11A.409593

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. COX, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 WHISPERING LAKE DR

City JONESBOROUGH State TN Zip Code 37659-7420

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
07 / 30 / 2016
Transaction ID : SA11A.359889

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 735.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 997 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COX, JOE, , ,		Date of Receipt MM / DD / YYYY 08 / 16 / 2016
Mailing Address 105 WHISPERING LAKE DR		Transaction ID : SA11A.368938
City JONESBOROUGH	State TN	Zip Code 37659-7420
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. COX, JOE, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016
Mailing Address 105 WHISPERING LAKE DR		Transaction ID : SA11A.384761
City JONESBOROUGH	State TN	Zip Code 37659-7420
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. COX, LINDA, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 4846 N BENTWOOD DRIVE		Transaction ID : SA11A.381317
City SAN ANGELO	State TX	Zip Code 76904-4800
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) TEXAS STATE BANK	Occupation (for Individual) BANKER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	1700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 998 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4846 N BENTWOOD DRIVE
 City SAN ANGELO State TX Zip Code 76904-4800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS STATE BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406674
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COX, RICHARD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1951 KAKELA DRIVE
 City HONOLULU State HI Zip Code 96822-2156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362779
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. COX, RICHARD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1951 KAKELA DRIVE
 City HONOLULU State HI Zip Code 96822-2156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411782
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 999 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID R. REICH DDS INC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352448
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID R. REICH DDS INC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358005
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID R. REICH DDS INC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368756
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1000 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 DAVID R. REICH DDS INC OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 21 / 2016
Transaction ID : SA11A.375903
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 DAVID R. REICH DDS INC OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 08 / 2016
Transaction ID : SA11A.391864
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 DAVID R. REICH DDS INC OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 21 / 2016
Transaction ID : SA11A.401501
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1001 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COX, SHONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BELLEFIELD AVE
 City WESTERVILLE State OH Zip Code 43081-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID R. REICH DDS INC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COXE, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1638 E. BUTLER PIKE
 City AMBLER State PA Zip Code 19002-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357613
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. COXE, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1638 E. BUTLER PIKE
 City AMBLER State PA Zip Code 19002-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382784
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1002 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COXE, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1638 E. BUTLER PIKE

City AMBLER	State PA	Zip Code 19002-2825
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406336

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. COXE, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1638 E. BUTLER PIKE

City AMBLER	State PA	Zip Code 19002-2825
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406346

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. COXE, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1638 E. BUTLER PIKE

City AMBLER	State PA	Zip Code 19002-2825
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413021

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1003 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COXE, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1638 E. BUTLER PIKE
 City AMBLER State PA Zip Code 19002-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418172
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. COYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 BUNTON STREET
 City MILTON State MA Zip Code 02186-5736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372298
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 BUNTON STREET
 City MILTON State MA Zip Code 02186-5736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386440
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1004 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 BUNTON STREET
 City MILTON State MA Zip Code 02186-5736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386468
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 BUNTON STREET
 City MILTON State MA Zip Code 02186-5736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386471
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. COYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 BUNTON STREET
 City MILTON State MA Zip Code 02186-5736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412112
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1005 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAGE, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 MASSACHUSETTS AVE

City WASHINGTON State DC Zip Code 20005-4161

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381518

Amount of Each Receipt this Period 4000.00

Memo Item CONTRIBUTION

B. CRAGHEAD, WYOMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11394 COUNTY ROAD 308

City LLANO State TX Zip Code 78643-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354521

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. CRAGHEAD, WYOMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11394 COUNTY ROAD 308

City LLANO State TX Zip Code 78643-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416224

Amount of Each Receipt this Period 75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1006 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 ANGELA LANE

City HENDERSON	State TX	Zip Code 75654-6723
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381060

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CRAIG, GLENN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1178 EAST 24 PLACE

City TULSA	State OK	Zip Code 74114-2639
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY HEALTH CONNECTION	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.366564

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.349768

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1007 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352337

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.354814

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375901

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1008 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.379751
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391945
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.392216
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1009 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.394586

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

B. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396892

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

C. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396893

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1010 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401492

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406120

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. CRAIG, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 RAINBOW DRIVE #7084

City LIVINGSTON	State TX	Zip Code 77399-1070
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410001

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1011 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415223
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415240
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CRAIG, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 RAINBOW DRIVE #7084
 City LIVINGSTON State TX Zip Code 77399-1070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.422544
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1012 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIG, SANDRA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12309 MOTLEY ROAD
 City PEYTON State CO Zip Code 80831-7984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356584
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348899
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365653
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1013 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372650
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.378837
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.384928
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1014 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385896
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CRAIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 COVENTRY LN
 City NICHOLS HILLS State OK Zip Code 73120-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408326
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CRANDALL, L., DALE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 ARKANSAS STREET
 City SAN FRANCISCO State CA Zip Code 94107-2831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIEDMONT CORPORATE ADVISORS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387604
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1015 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRANE, W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1000

City MIDDLEBURG	State VA	Zip Code 20118-1000
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C2I, LLC	Occupation (for Individual) FORESTRY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016

Transaction ID : SA11A.345213

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CRANE, WILLIAM, A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 863 PEMBRIDGE DRIVE

City LAKE FOREST	State IL	Zip Code 60045-4202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11A.365938

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CRANNEY, MICHAEL, , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 W 1300 S

City OAKLEY	State ID	Zip Code 83346-9756
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016

Transaction ID : SA11A.354495

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1016 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CRANNEY, MICHAEL, , ,

Mailing Address 503 W 1300 S

City OAKLEY State ID Zip Code 83346-9756

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 / /

Transaction ID : SA11A.379995

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CRANNEY, MICHAEL, , ,

Mailing Address 503 W 1300 S

City OAKLEY State ID Zip Code 83346-9756

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 / /

Transaction ID : SA11A.411712

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CRAWFORD, BETTY, R., MS.,

Mailing Address 601 ASPEN TRAIL

City MUSCATINE State IA Zip Code 52761-2873

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 / /

Transaction ID : SA11A.387682

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1017 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAWFORD, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16164 SIERRA HWY
 City SANTA CLARITA State CA Zip Code 91390-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SANTA CLARITA CONCRETE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380281
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CRAY, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6267 S. MILLER CT.
 City LITTLETON State CO Zip Code 80127-5584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388854
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CRAY, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6267 S. MILLER CT.
 City LITTLETON State CO Zip Code 80127-5584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422834
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1018 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CREAMER, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 GENESEO ROAD
 City SAN ANTONIO State TX Zip Code 78209-6124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378426
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CREEDON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE PRYER LANE
 City LARCHMONT State NY Zip Code 10538-4012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376497
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357642
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1019 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368959
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.385189
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398200
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1020 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398729
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413084
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CREWS, NITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 MOORE STREET
 City PRESCOTT State AR Zip Code 71857-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416317
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1021 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355784
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365782
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379383
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1022 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380786
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408000
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409079
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1023 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRISLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5284 BARDWELL AVENUE
 City RIVERSIDE State CA Zip Code 92506-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **09 / 24 / 2016**
Transaction ID : SA11A.409080
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CRITCHFIELD, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30023 STEELHEAD
 City CANYON LAKE State CA Zip Code 92587-7460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366831
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CRITCHFIELD, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30023 STEELHEAD
 City CANYON LAKE State CA Zip Code 92587-7460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1024 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CRITCHFIELD, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30023 STEELHEAD
 City CANYON LAKE State CA Zip Code 92587-7460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CROCKER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 POST STREET, SUITE 2160
 City SAN FRANCISCO State CA Zip Code 94104-5228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378580
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CROCKETT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10326 RAINIER AVE S
 City SEATTLE State WA Zip Code 98178-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377413
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1025 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROCKETT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10326 RAINIER AVE S
 City SEATTLE State WA Zip Code 98178-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384845
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CROCKETT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10326 RAINIER AVE S
 City SEATTLE State WA Zip Code 98178-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398607
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CROMER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5995 CHUKKER COURT
 City CUMMING State GA Zip Code 30040-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIG COMPANY Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415696
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1026 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CROMER, ROBERT, , ,

Mailing Address **5995 CHUKKER COURT**

City CUMMING	State GA	Zip Code 30040-5701
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BIG COMPANY	Occupation (for Individual) IT MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.415697

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CRONK, GERALD, , ,

Mailing Address **13 NATOMA DR.**

City OEK BROOK	State IL	Zip Code 60523-7711
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
07 / 21 / 2016

Transaction ID : SA11A.352073

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CROOKS, MIKE, , ,

Mailing Address **1829 NANDEL LANE**

City PORTLAND	State IN	Zip Code 47371-8720
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED GOLD INC.	Occupation (for Individual) MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
07 / 28 / 2016

Transaction ID : SA11A.357068

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1027 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROOKS, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1829 NANDEL LANE

City PORTLAND	State IN	Zip Code 47371-8720
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED GOLD INC.	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.406227

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CROSBY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3109 S. 268TH PL

City KENT	State WA	Zip Code 98032-6904
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2016

Transaction ID : SA11A.348530

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CROSBY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3109 S. 268TH PL

City KENT	State WA	Zip Code 98032-6904
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.382162

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1028 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROSBY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3109 S. 268TH PL

City KENT	State WA	Zip Code 98032-6904
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394495

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. CROSBY, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2313 OAKFIELD DRIVE

City MIDLAND	State MI	Zip Code 48640-6732
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROSBY REAL ESTATE	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387588

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CROSS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3417 SILVER SPUR DRIVE

City SAN ANGELO	State TX	Zip Code 76904-8113
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LONE STAR BEEF	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414393

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1029 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROSS, RAQUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4208 STATE STREET

City ERIE	State PA	Zip Code 16508-3132
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
08 / 23 / 2016
Transaction ID : SA11A.376834

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. CROSS, RAQUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4208 STATE STREET

City ERIE	State PA	Zip Code 16508-3132
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.381548

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. CROSS, W., THOMAS, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 OLD NORWALK ROAD

City NEW CANAAN	State CT	Zip Code 06840-6426
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 08 / 2016
Transaction ID : SA11A.361462

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1030 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CROUCH, DENNIS, E., MR., USAF (RET)

Mailing Address 3069 RANCHFIELD DRIVE

City BEAVERCREEK	State OH	Zip Code 45432-2610
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.348282

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CROUCH, DENNIS, E., MR., USAF (RET)

Mailing Address 3069 RANCHFIELD DRIVE

City BEAVERCREEK	State OH	Zip Code 45432-2610
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350092

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CROUCH, DENNIS, E., MR., USAF (RET)

Mailing Address 3069 RANCHFIELD DRIVE

City BEAVERCREEK	State OH	Zip Code 45432-2610
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401539

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1031 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROUCH, DENNIS, E., MR., USAF (RET)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3069 RANCHFIELD DRIVE
 City BEAVERCREEK State OH Zip Code 45432-2610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419220
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. CROUCH, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 599
 City FARMINGTON State MO Zip Code 63640-0599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROUCH FARLEY Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354262
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. CROUCH, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 599
 City FARMINGTON State MO Zip Code 63640-0599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROUCH FARLEY Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406682
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1032 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROUL, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1901 BAYADERE TERRACE

City CORONA DEL MAR	State CA	Zip Code 92625-1810
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11A.407500

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. CROWDER, DARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6202 JEFFERSON BOULEVARD

City FREDERICK	State MD	Zip Code 21703-5808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.350860

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CROWDER, DARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6202 JEFFERSON BOULEVARD

City FREDERICK	State MD	Zip Code 21703-5808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SA11A.379869

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1033 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWDER, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6202 JEFFERSON BOULEVARD
 City FREDERICK State MD Zip Code 21703-5808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414873
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CROWDER, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6202 JEFFERSON BOULEVARD
 City FREDERICK State MD Zip Code 21703-5808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414884
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CROWDER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 SAWYERS POINT RD.
 City MIRROR LAKE State NH Zip Code 03853-6057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415145
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1034 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWDER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 SAWYERS POINT RD.
 City MIRROR LAKE State NH Zip Code 03853-6057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415149
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CROWDER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6202 JEFFERSON BOULEVARD
 City FREDERICK State MD Zip Code 21703-5808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357297
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CROWDER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6202 JEFFERSON BOULEVARD
 City FREDERICK State MD Zip Code 21703-5808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381980
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1035 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWDER, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6202 JEFFERSON BOULEVARD

City FREDERICK	State MD	Zip Code 21703-5808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PEDIATRICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394336

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CROWE, JEWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1030 HAWTHORNE HEIGHTS

City GREENSBORO	State GA	Zip Code 30642-7094
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROWE MARINE, INC	Occupation (for Individual) SEC/TREAS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2016

Transaction ID : SA11A.346593

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CROWE, JEWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1030 HAWTHORNE HEIGHTS

City GREENSBORO	State GA	Zip Code 30642-7094
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROWE MARINE, INC	Occupation (for Individual) SEC/TREAS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363885

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1036 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWE, JEWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1030 HAWTHORNE HEIGHTS

City GREENSBORO	State GA	Zip Code 30642-7094
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROWE MARINE, INC	Occupation (for Individual) SEC/TREAS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392155

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CROWELL, JOHN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8626 S 12TH STREET

City PORTAGE	State MI	Zip Code 49024-4541
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN METAL FAB INC	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349459

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CROWELL, JOHN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8626 S 12TH STREET

City PORTAGE	State MI	Zip Code 49024-4541
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN METAL FAB INC	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364275

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1037 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWLEY, BARBARA, T., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 WATERS DRIVE
APT A208

City SOUTHERN PINES State NC Zip Code 28387-2248

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389748

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

B. CROWLEY, BARBARA, T., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 WATERS DRIVE
APT A208

City SOUTHERN PINES State NC Zip Code 28387-2248

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417444

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

C. CROWLEY, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 DANGELO DRIVE

City MARLBOROUGH State MA Zip Code 01752-3066

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KEN'S FOOD INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417435

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1038 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2008 VIZCAYA WALK
 City SACRAMENTO State CA Zip Code 95818-1772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386688
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CROWLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2008 VIZCAYA WALK
 City SACRAMENTO State CA Zip Code 95818-1772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.404429
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CROWN, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17700 LONGDRAFT ROAD
 City GAITHERSBURG State MD Zip Code 20878-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWMAN CONSULTING GROUP Occupation (for Individual) PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418183
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 700.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1039 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CROWTHER, MARY, D., MRS.,

Mailing Address **8431 BRIAR LANE**

City PRAIRIE VILLAGE	State KS	Zip Code 66207-1746
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
07 / 19 / 2016

Transaction ID : SA11A.350695

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CROWTHER, MARY, D., MRS.,

Mailing Address **8431 BRIAR LANE**

City PRAIRIE VILLAGE	State KS	Zip Code 66207-1746
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 24 / 2016

Transaction ID : SA11A.380145

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CROWTHER, MARY, D., MRS.,

Mailing Address **8431 BRIAR LANE**

City PRAIRIE VILLAGE	State KS	Zip Code 66207-1746
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 23 / 2016

Transaction ID : SA11A.404622

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1040 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CROWTHER, MARY, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8431 BRIAR LANE
 City PRAIRIE VILLAGE State KS Zip Code 66207-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404623
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CRUM, SYLVIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WEST LANE
 City HOUSTON State TX Zip Code 77019-1007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386589
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CRUMBAUGH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 NORHT LAKESHORE DRIVE 10-A
 City CHICAGO State IL Zip Code 60611-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATHAM & WATKINS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397643
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1041 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRUMBAUGH, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1040 NORHT LAKESHORE DRIVE
10-A

City CHICAGO State IL Zip Code 60611-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LATHAM & WATKINS Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.418283

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. CRUMPLER, HOUSTON, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 68

City ROSEBORO State NC Zip Code 28382-0068

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.377213

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. CRUSE, ANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 FARRA ST

City RANCHO MISSION VIE State CA Zip Code 92694-1385

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESIGNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2016

Transaction ID : SA11A.377462

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1042 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CRUZ, ARNOLDO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3714 GLADES END LN

City RICHMOND	State VA	Zip Code 23233-1778
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 427.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016
Transaction ID : SA11A.359443

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. CRUZ, ARNOLDO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3714 GLADES END LN

City RICHMOND	State VA	Zip Code 23233-1778
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 427.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016
Transaction ID : SA11A.380800

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. CRUZ, ARNOLDO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3714 GLADES END LN

City RICHMOND	State VA	Zip Code 23233-1778
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 427.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016
Transaction ID : SA11A.410915

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1043 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CRYDER, CLARICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4363 PINE COVE ROAD
 City BILLINGS State MT Zip Code 59106-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350441
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CRYDER, CLARICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4363 PINE COVE ROAD
 City BILLINGS State MT Zip Code 59106-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374390
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CRYDER, CLARICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4363 PINE COVE ROAD
 City BILLINGS State MT Zip Code 59106-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374393
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1044 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRYDER, CLARICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4363 PINE COVE ROAD
 City BILLINGS State MT Zip Code 59106-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374402
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. CRYDER, CLARICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4363 PINE COVE ROAD
 City BILLINGS State MT Zip Code 59106-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.414197
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CRYDER, CLARICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4363 PINE COVE ROAD
 City BILLINGS State MT Zip Code 59106-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.414201
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1045 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRYER, JOANNE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40427 DOLERITA AVENUE
 City FREMONT State CA Zip Code 94539-3097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410280
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. CRYER, JOANNE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40427 DOLERITA AVENUE
 City FREMONT State CA Zip Code 94539-3097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422138
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. CRYSTAL, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 SADDLEBROOK CURVE
 City CHANHASSEN State MN Zip Code 55317-9025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392096
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1046 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CRYSTAL, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 SADDLEBROOK CURVE
 City CHANHASSEN State MN Zip Code 55317-9025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392098
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CUA, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 842 FORREST RIDGE DRIVE
 City DOVER State OH Zip Code 44622-1352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUA REFINISHING CO., INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353837
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CUA, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 842 FORREST RIDGE DRIVE
 City DOVER State OH Zip Code 44622-1352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUA REFINISHING CO., INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387457
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1047 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUA, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 842 FORREST RIDGE DRIVE

City DOVER	State OH	Zip Code 44622-1352
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CUA REFINISHING CO., INC.	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387487

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. CUA, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 842 FORREST RIDGE DRIVE

City DOVER	State OH	Zip Code 44622-1352
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CUA REFINISHING CO., INC.	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409850

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CUCINELL, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 MOUNTAIN VIEW AVENUE

City RIDGEFIELD	State CT	Zip Code 06877-4010
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELWAY ELECTRICAL CONTRACTING CORP.	Occupation (for Individual) ELECTRICAL CONTRACTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353426

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1048 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUDAHY, MICHAEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 E WELLS STREET
 City MILWAUKEE State WI Zip Code 53202-3900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE ENDEAVORS GROUP, Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385214
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. CULBERTSON, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3437 PALO VISTA DRIVE
 City RANCHO PALOS VERDE State CA Zip Code 90275-6158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391639
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CULBERTSON, ROBERT, M., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 53
 City DELAVAN State IL Zip Code 61734-0053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.347692
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1049 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CULBERSON, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2680 MISTY MEADOW DRIVE
 City PROSPER State TX Zip Code 75078-9745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIMKUS CONSULTING GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415996
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CULBERSON, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2680 MISTY MEADOW DRIVE
 City PROSPER State TX Zip Code 75078-9745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIMKUS CONSULTING GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416000
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CULBERSON, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2680 MISTY MEADOW DRIVE
 City PROSPER State TX Zip Code 75078-9745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIMKUS CONSULTING GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416011
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1050 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CULLEN, MARK, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 JEFFERSON AVENUE

City JANESVILLE	State WI	Zip Code 53545-4131
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JP CULLEN & SONS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391339

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. CULLEN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 93 CRESTA VERDE DR.

City ROLLING HILLS ESTA	State CA	Zip Code 90274-5456
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391643

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. CULLEN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 93 CRESTA VERDE DR.

City ROLLING HILLS ESTA	State CA	Zip Code 90274-5456
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.400996

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1051 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CULLEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 CRESTA VERDE DR.
 City ROLLING HILLS ESTA State CA Zip Code 90274-5456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411193
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CULLUM, JANE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 90
 City TAFTON State PA Zip Code 18464-0090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388380
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. CULLUM, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6600 TURTLE CREEK
 City DALLAS State TX Zip Code 75205-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAIRWAY CAPITAL PARTNERS Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399485
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1052 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344313
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.376398
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.379085
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1053 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380420
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386269
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CUMMINS, JOAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 ASHLEY WOODS DRIVE
 City WESTCHESTER State IL Zip Code 60154-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386270
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1054 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. CUMMINS, JOAN, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 ASHLEY WOODS DRIVE

City WESTCHESTER	State IL	Zip Code 60154-5908
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
785.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.392261

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CUMMINS, JOAN, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 ASHLEY WOODS DRIVE

City WESTCHESTER	State IL	Zip Code 60154-5908
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
785.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394491

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. CUMMINGS, OGDEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1163 OLD GATE COURT

City MCLEAN	State VA	Zip Code 22102-2532
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLEXIBILTiy & CO LLC	Occupation (for Individual) TREASURER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379576

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1055 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUNDEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 WELLINGTON DRIVE
 City AUGUSTA State GA Zip Code 30909-3763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360999
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CUNEO, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1216 N WEST STREET
 City NAPERVILLE State IL Zip Code 60563-2427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369610
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CUNEO, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 BROADWAY
 City SONOMA State CA Zip Code 95476-7011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376907
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1056 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUNEO, RICHARD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 708 BROADWAY

City SONOMA	State CA	Zip Code 95476-7011
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389699

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. CUNIFFE, AMY, JENSEN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7715 CROSSOVER DR

City MC LEAN	State VA	Zip Code 22102-2507
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EY	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.377665

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. CUNNINGHAM, MILFORD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7035 E. JUNIPER VILLAGE DRIVE

City GOLD CANYON	State AZ	Zip Code 85118-1745
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
362.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408575

Amount of Each Receipt this Period
131.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2731.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1057 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUNNINGHAM, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5128 TANGLE LANE
 City HOUSTON State TX Zip Code 77056-2116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTERPRISE PRODUCTS COMPANY Occupation (for Individual) ENERGY EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391822
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CUNNINGHAM, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5128 TANGLE LANE
 City HOUSTON State TX Zip Code 77056-2116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTERPRISE PRODUCTS COMPANY Occupation (for Individual) ENERGY EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391824
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CUNNINGHAM, RAYMOND, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16890 ELM ROAD
 City MAPLE GROVE State MN Zip Code 55311-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.347691
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1058 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUNNINGHAM, RAYMOND, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16890 ELM ROAD
 City MAPLE GROVE State MN Zip Code 55311-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366203
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CURAMENG, PERLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4352 VICTIRIA AVE.
 City UNION CITY State CA Zip Code 94587-3867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359811
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CURAMENG, PERLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4352 VICTIRIA AVE.
 City UNION CITY State CA Zip Code 94587-3867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.396676
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1059 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURAMENG, PERLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4352 VICTIRIA AVE.
 City UNION CITY State CA Zip Code 94587-3867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396677
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CURAMENG, PERLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4352 VICTIRIA AVE.
 City UNION CITY State CA Zip Code 94587-3867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412236
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CURAMENG, PERLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4352 VICTIRIA AVE.
 City UNION CITY State CA Zip Code 94587-3867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412248
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1060 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURAMENG, PERLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4352 VICTIRIA AVE.
 City UNION CITY State CA Zip Code 94587-3867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412249
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CURRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7209 HANOVER ST.
 City HANOVER PARK State IL Zip Code 60133-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.358464
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. CURRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7209 HANOVER ST.
 City HANOVER PARK State IL Zip Code 60133-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.358465
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1061 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7209 HANOVER ST.
 City HANOVER PARK State IL Zip Code 60133-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370099
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. CURRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7209 HANOVER ST.
 City HANOVER PARK State IL Zip Code 60133-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382827
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. CURRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7209 HANOVER ST.
 City HANOVER PARK State IL Zip Code 60133-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413117
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1062 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURRAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 FORMERO ST
 City RANCHO MISSION VIE State CA Zip Code 92694-1295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGEX Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415021
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. CURRAN, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 TEMPLE STREET
 City NEW HAVEN State CT Zip Code 06511-6801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382314
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. CURRAN, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 TEMPLE STREET
 City NEW HAVEN State CT Zip Code 06511-6801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394194
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1063 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURRAN, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 TEMPLE STREET
 City NEW HAVEN State CT Zip Code 06511-6801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394226
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CURRAN, WILLIAM, E., , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 W MUNDHANK ROAD
 City S BARRINGTON State IL Zip Code 60010-9557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417125
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. CURRIE, NICKIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2308 NORTH COLUMBUS ST
 City ARLINGTON State VA Zip Code 22207-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMGEN Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 07 / 02 / 2016
Transaction ID : SA11A.346036
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1064 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURRIE, NICKIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2308 NORTH COLUMBUS ST
 City ARLINGTON State VA Zip Code 22207-2525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMGEN Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414815
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357371
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379034
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1065 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386197
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.392115
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410838
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1066 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CURTIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 8TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CURTIS Occupation (for Individual) MFGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410841
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CURTIN, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 FOX RIVER DRIVE
 City BLOOMFIELD HILLS State MI Zip Code 48304-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408441
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CUSHMAN, JOHN, C., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 S FIGUERREA ST 47TH FL
 City LOS ANGELES State CA Zip Code 90017-5752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN AND WAKEFIELD Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398477
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1067 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUSHMAN, SHOHN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 S FIGUERREA ST 47TH FL
 City LOS ANGELES State CA Zip Code 90017-5752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398478
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. CUSTARD III, W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4230 ARCADY AVE.
 City DALLAS State TX Zip Code 75205-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PITTS OIL CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388680
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CUSTARD III, W., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4230 ARCADY AVE.
 City DALLAS State TX Zip Code 75205-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PITTS OIL CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388682
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	27000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1068 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUSTER, GEORGE, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 LOURDES STREET
 City CORPUS CHRISTI State TX Zip Code 78414-6143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTER SYSTEMS DESIGN INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414773
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CUSTER, VERLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1744 E. 800 N.
 City RUSHVILLE State IN Zip Code 46173-8915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349173
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CUTCHINS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 MONUMENT AVE 4A
 City RICHMOND State VA Zip Code 23226-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350523
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1069 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUTCHINS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 MONUMENT AVE
 4A
 City RICHMOND State VA Zip Code 23226-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355530
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CUTCHINS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 MONUMENT AVE
 4A
 City RICHMOND State VA Zip Code 23226-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363824
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CUTCHINS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 MONUMENT AVE
 4A
 City RICHMOND State VA Zip Code 23226-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368445
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1070 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUTCHINS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 MONUMENT AVE
 4A
 City RICHMOND State VA Zip Code 23226-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390490
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CUTCHINS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 MONUMENT AVE
 4A
 City RICHMOND State VA Zip Code 23226-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404467
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CUTCHINS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 MONUMENT AVE
 4A
 City RICHMOND State VA Zip Code 23226-1426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.411666
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1071 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUTILLO, KENNETH, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 TUDOR RD

City CHESTNUT HILL State MA Zip Code 02467-3964

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOSTON FINANCIAL Occupation (for Individual) EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.395812

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

B. CUTTINGHAM, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 504 LINCOLN AVENUE

City AVON BY THE SEA State NJ Zip Code 07717-1151

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344361

Amount of Each Receipt this Period 59.00

Memo Item CONTRIBUTION

C. CUTTINGHAM, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 504 LINCOLN AVENUE

City AVON BY THE SEA State NJ Zip Code 07717-1151

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392466

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1084.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1072 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUTTINGHAM, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 LINCOLN AVENUE
 City AVON BY THE SEA State NJ Zip Code 07717-1151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404617
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. CZER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 9TH ST.
 City SANTA MONICA State CA Zip Code 90402-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382538
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CZER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 9TH ST.
 City SANTA MONICA State CA Zip Code 90402-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394497
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1073 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CZER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 9TH ST.
 City SANTA MONICA State CA Zip Code 90402-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDARS-SINAI HEALTH SYSTEM Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411409
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. D'ALOIA , G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435W 27TH ST
 City MIAMI BEACH State FL Zip Code 33140-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344415
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. D'ALOIA , G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435W 27TH ST
 City MIAMI BEACH State FL Zip Code 33140-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351955
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1074 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
D'ALOIA , G , , ,

Mailing Address 1435W 27TH ST

City MIAMI BEACH	State FL	Zip Code 33140-4208
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11A.386813

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
D'ALOIA , G , , ,

Mailing Address 1435W 27TH ST

City MIAMI BEACH	State FL	Zip Code 33140-4208
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11A.386816

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
D'ALOIA , G , , ,

Mailing Address 1435W 27TH ST

City MIAMI BEACH	State FL	Zip Code 33140-4208
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016

Transaction ID : SA11A.413407

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1075 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. D'ALONZO, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4127
 City WILMINGTON State DE Zip Code 19807-0127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357937
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. D'AMICO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27338 N 103RD STREET
 City SCOTTSDALE State AZ Zip Code 85262-8315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360954
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. D'ARATA, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 DELAWARE AVE
 City BUFFALO State NY Zip Code 14202-1622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANSA & D'ARATA LLP Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383464
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1076 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DABBONDANZA, ROD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12600 PARKLAND DRIVE
 City ROCKVILLE State MD Zip Code 20853-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RMD FINANCIAL INC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358122
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. DABBONDANZA, ROD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12600 PARKLAND DRIVE
 City ROCKVILLE State MD Zip Code 20853-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RMD FINANCIAL INC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370358
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. DABBONDANZA, ROD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12600 PARKLAND DRIVE
 City ROCKVILLE State MD Zip Code 20853-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RMD FINANCIAL INC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400206
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1077 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DABROW, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 GRAYS LANE
 City HAVERFORD State PA Zip Code 19041-1727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381123
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. DACEY, SCOTT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 TRENT SHORES DRIVE
 City TRENT WOODS State NC Zip Code 28562-7741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PACE COMPANIES Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421185
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.351068
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1078 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.354029
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377632
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380161
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1079 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381813
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381816
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DAGENAIS, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 BARKMAN DR
 City WATERFORD State MI Zip Code 48329-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381817
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1080 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAGENAIS, DALLAS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2931 BARKMAN DR

City WATERFORD	State MI	Zip Code 48329-2527
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391278

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DAGENAIS, DALLAS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2931 BARKMAN DR

City WATERFORD	State MI	Zip Code 48329-2527
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408771

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DAGENAIS, DALLAS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2931 BARKMAN DR

City WATERFORD	State MI	Zip Code 48329-2527
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413908

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1081 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAGGETT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1219 E. MOSS STREET

City PHOENIX	State AZ	Zip Code 85020-1231
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL T. DAGGETT, CPA	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.350690

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DAGGETT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1219 E. MOSS STREET

City PHOENIX	State AZ	Zip Code 85020-1231
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL T. DAGGETT, CPA	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : SA11A.386777

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DAGGETT, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1219 E. MOSS STREET

City PHOENIX	State AZ	Zip Code 85020-1231
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICHAEL T. DAGGETT, CPA	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : SA11A.386804

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1082 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAHL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 788
 City LACROSSE State WI Zip Code 54602-0788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAHL AUTOMOTIVE Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381958
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DAHL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 788
 City LACROSSE State WI Zip Code 54602-0788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAHL AUTOMOTIVE Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381959
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DAHL, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 788
 City LACROSSE State WI Zip Code 54602-0788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAHL AUTOMOTIVE Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412231
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1083 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAHLBERG, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 22
 City CAMPBELLTOWN State PA Zip Code 17010-0022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386649
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

B. DAHLBERG, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 22
 City CAMPBELLTOWN State PA Zip Code 17010-0022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419465
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

C. DAHLEN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 VALLEY OAK DRIVE
 City LOVELAND State CO Zip Code 80538-8966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
 09 / 12 / 2016
Transaction ID : SA11A.392656
 Amount of Each Receipt this Period
 5400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1084 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAHLSTEDT, PAT, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13048 FARM TO MARKET ROAD
 City MOUNT VERNON State WA Zip Code 98273-8705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HOUSEWIFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362797
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DALE, MARY, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20406 FORTUNES WAY
 City REMINGTON State VA Zip Code 22734-1716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387637
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DALGLIESH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3190 HAYNIE ROAD
 City CUSTER State WA Zip Code 98240-9204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLUMBIA GAMES INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384479
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1085 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DALGLIESH, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3190 HAYNIE ROAD

City CUSTER	State WA	Zip Code 98240-9204
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLUMBIA GAMES INC	Occupation (for Individual) SMALL BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410117

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DALGLIESH, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3190 HAYNIE ROAD

City CUSTER	State WA	Zip Code 98240-9204
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLUMBIA GAMES INC	Occupation (for Individual) SMALL BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410123

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DALMAN, JESSIE, F., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 SPRING BEAUTY LANE

City HOLLAND	State MI	Zip Code 49423-8815
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348758

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1086 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DALMAN, JESSIE, F., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 SPRING BEAUTY LANE

City HOLLAND	State MI	Zip Code 49423-8815
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.357853

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DALMAN, JESSIE, F., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 SPRING BEAUTY LANE

City HOLLAND	State MI	Zip Code 49423-8815
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.383526

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. DALMAN, JESSIE, F., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 SPRING BEAUTY LANE

City HOLLAND	State MI	Zip Code 49423-8815
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394024

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1087 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DALMAN, JESSIE, F., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 SPRING BEAUTY LANE

City HOLLAND	State MI	Zip Code 49423-8815
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.394025

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DALMAN, JESSIE, F., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 SPRING BEAUTY LANE

City HOLLAND	State MI	Zip Code 49423-8815
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.404954

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DALMAN, JESSIE, F., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 SPRING BEAUTY LANE

City HOLLAND	State MI	Zip Code 49423-8815
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.404955

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1088 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DALMAN, JESSIE, F., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4056 SPRING BEAUTY LANE
 City HOLLAND State MI Zip Code 49423-8815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417633
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DALMAN, JESSIE, F., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4056 SPRING BEAUTY LANE
 City HOLLAND State MI Zip Code 49423-8815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417635
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DALOIA, GP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 W 27TH ST
 City MIAMI BEACH State FL Zip Code 33140-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363869
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1089 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DALSIN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16033 NORHTWOOD RD NW

City PRIOR LAKE	State MN	Zip Code 55372-1611
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EBSO, INC.	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349641

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DALSIN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16033 NORHTWOOD RD NW

City PRIOR LAKE	State MN	Zip Code 55372-1611
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EBSO, INC.	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.363024

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DALTON, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 332 S. HUNTINGTON AVE.

City SAN DIMAS	State CA	Zip Code 91773-2488
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUALITY TELESERVICES, INC.	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368470

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1090 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DALTON, KENNETH, , ,		Date of Receipt MM / DD / YYYY 08 / 24 / 2016 Transaction ID : SA11A.380175
Mailing Address 332 S. HUNTINGTON AVE.		Amount of Each Receipt this Period 250.00
City SAN DIMAS	State CA	Zip Code 91773-2488
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) QUALITY TELESERVICES, INC.	Occupation (for Individual) MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DALTON, KENNETH, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016 Transaction ID : SA11A.390157
Mailing Address 332 S. HUNTINGTON AVE.		Amount of Each Receipt this Period 100.00
City SAN DIMAS	State CA	Zip Code 91773-2488
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) QUALITY TELESERVICES, INC.	Occupation (for Individual) MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DALTON, KENNETH, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016 Transaction ID : SA11A.390159
Mailing Address 332 S. HUNTINGTON AVE.		Amount of Each Receipt this Period 100.00
City SAN DIMAS	State CA	Zip Code 91773-2488
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) QUALITY TELESERVICES, INC.	Occupation (for Individual) MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1091 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DALTON, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 332 S. HUNTINGTON AVE.
 City SAN DIMAS State CA Zip Code 91773-2488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY TELESERVICES, INC. Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398671
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DALTON, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5934 SHY DRIVE
 City FRISCO State TX Zip Code 75034-4840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414619
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DAMERON, DEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5890 LEELAND ST S
 City ST PETERSBURG State FL Zip Code 33715-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GD-OTS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353819
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1092 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAMERON, DEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5890 LEELAND ST S
 City ST PETERSBURG State FL Zip Code 33715-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GD-OTS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370468
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAMERON, DEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5890 LEELAND ST S
 City ST PETERSBURG State FL Zip Code 33715-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GD-OTS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408462
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DANIALI, SAEED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 175TH ST SW
 City EDMONDS State WA Zip Code 98026-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WASHINGTON Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380216
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1093 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DANIALI, SAEED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 175TH ST SW
 City EDMONDS State WA Zip Code 98026-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WASHINGTON Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390200
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DANIALI, SAEED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 175TH ST SW
 City EDMONDS State WA Zip Code 98026-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WASHINGTON Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390202
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DANIALI, SAEED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 175TH ST SW
 City EDMONDS State WA Zip Code 98026-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WASHINGTON Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408980
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1094 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DANIEL, C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 OAKHURST TRAIL
 City RIDGELAND State MS Zip Code 39157-8608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385180
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. DANIELS, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27496 MAX STREET
 City EDWARDSBURG State MI Zip Code 49112-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401099
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. DANIEL, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 OAKHURST TRAIL
 City RIDGELAND State MS Zip Code 39157-8608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385181
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1095 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DANNENBAUM, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 W. ALABAMA
 City HOUSTON State TX Zip Code 77098-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376419
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. DANNUNZIO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 W BIG BEAVER ROAD SUITE 1400
 City TROY State MI Zip Code 48084-5295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARASON ROOFING TECH Occupation (for Individual) CONSTRUCTION CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362775
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DAPUZZO, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 PILOTROCK
 City RIVERSIDE State CT Zip Code 06878-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365879
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1096 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAPUZZO, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 PILOTROCK
 City RIVERSIDE State CT Zip Code 06878-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386684
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DARLING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PEQUOT ROAD
 City MARBLEHEAD State MA Zip Code 01945-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350142
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DARR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 NORFOLK ST.
 City REHOBOTH BEACH State DE Zip Code 19971-2254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374512
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1097 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DARR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 NORFOLK ST.
 City REHOBOTH BEACH State DE Zip Code 19971-2254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388653
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DARR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 NORFOLK ST.
 City REHOBOTH BEACH State DE Zip Code 19971-2254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388655
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DARR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 NORFOLK ST.
 City REHOBOTH BEACH State DE Zip Code 19971-2254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388656
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1098 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DARRAGH, H., A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3 VERA LANE
City CONSHOHOCKEN State PA Zip Code 19428-2113
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357908
Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. DASH, RAJESH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 510 KEN DR
City SAN ANTONIO State TX Zip Code 78258-3252
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SOFTWARE ENGINEER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384653
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DASH, RAJESH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 510 KEN DR
City SAN ANTONIO State TX Zip Code 78258-3252
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SOFTWARE ENGINEER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398553
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1099 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DASH, RAJESH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 510 KEN DR
City SAN ANTONIO State TX Zip Code 78258-3252
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SOFTWARE ENGINEER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417683
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAUB, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2305 HOLLOW VIEW DRIVE
City EASTON State PA Zip Code 18040-7564
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368556
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DAUCH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5069 STATE ROUTE 303
City WAKEMAN State OH Zip Code 44889-9234
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406150
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1100 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DAUCH, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 5069 STATE ROUTE 303		Transaction ID : SA11A.420341
City WAKEMAN	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DAUCH, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 5069 STATE ROUTE 303		Transaction ID : SA11A.420342
City WAKEMAN	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DAUCSAVAGE, BRUCE, L., ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 2705 NW COLLETT WAY		Transaction ID : SA11A.367884
City BEND	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) OCHOCO LUMBER CO	Occupation (for Individual) PRESIDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1101 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIDSON, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 424 SEASPRAY AVENUE
 City PALM BEACH State FL Zip Code 33480-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414741
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. DAVID, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 BRAZOS STREET
 City ROSWELL State NM Zip Code 88201-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403057
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DAVID, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 BRAZOS STREET
 City ROSWELL State NM Zip Code 88201-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403244
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1102 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIDSON, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5780 S GOLDSMITH PL
 City GREENWOOD VILLAGE State CO Zip Code 80111-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST AMERICAN STATE BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390831
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAVIDSON, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5780 S GOLDSMITH PL
 City GREENWOOD VILLAGE State CO Zip Code 80111-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST AMERICAN STATE BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391878
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DAVIDSON, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5780 S GOLDSMITH PL
 City GREENWOOD VILLAGE State CO Zip Code 80111-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST AMERICAN STATE BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391879
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1103 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIDSON, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5780 S GOLDSMITH PL
 City GREENWOOD VILLAGE State CO Zip Code 80111-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST AMERICAN STATE BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403868
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAVIDSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 CENTERBROOK DRIVE
 City BRANDON State FL Zip Code 33511-8074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383341
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DAVIDSON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 SUNRISE CAY DRIVE
 City KEY LARGO State FL Zip Code 33037-5301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384017
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1104 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIES, HARRY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2119 STATUTE LANE
 City VIENNA State VA Zip Code 22181-3265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365231
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. DAVIS, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 2ND AVENUE W APT 101
 City SEATTLE State WA Zip Code 98119-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378339
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DAVIS, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4&10 S SADDLEHORN DR
 City RENO State NV Zip Code 89511-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357393
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1105 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4&10 S SADDLEHORN DR**

City **RENO** State **NV** Zip Code **89511-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt **08 / 28 / 2016**

Transaction ID : SA11A.382696

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

B. DAVIS, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4&10 S SADDLEHORN DR**

City **RENO** State **NV** Zip Code **89511-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt **09 / 06 / 2016**

Transaction ID : SA11A.390574

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

C. DAVIS, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4&10 S SADDLEHORN DR**

City **RENO** State **NV** Zip Code **89511-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt **09 / 16 / 2016**

Transaction ID : SA11A.398855

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1106 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, DONALD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 VIA CASITAS # 1113
 City GREENBRAE State CA Zip Code 94904-1939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361536
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DAVIS, DONALD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 VIA CASITAS # 1113
 City GREENBRAE State CA Zip Code 94904-1939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365261
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DAVIS, DWIGHT, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 647
 City SISTER BAY State WI Zip Code 54234-0647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENHECK CORP Occupation (for Individual) OWNER/CHAIRMAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369494
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1107 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 TIMBERLINE DR
 City TRENTON State IL Zip Code 62293-1756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381988
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DAVIS, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4320 FOREST HILL DRIVE UNIT 411
 City FAIRFAX State VA Zip Code 22030-5771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373887
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DAVIS, JAMES, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 GUEST ST
 City BOSTON State MA Zip Code 02135-2028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW BALANCE ATHLETIC SHOES, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.369888
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1108 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1637 WILLOW ST
 City NORRISTOWN State PA Zip Code 19401-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STV GROUP Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.412390
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAVIS, MARTY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 SPRESSER ST.
 City TAYLORVILLE State IL Zip Code 62568-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDAVIS MGMT CO INC Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349409
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DAVIS, MARTY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 SPRESSER ST.
 City TAYLORVILLE State IL Zip Code 62568-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDAVIS MGMT CO INC Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374677
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1109 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, MARTY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 SPRESSER ST.
 City TAYLORVILLE State IL Zip Code 62568-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDAVIS MGMT CO INC Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399727
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. DAVIS, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 152620
 City LUFKIN State TX Zip Code 75915-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS INSURANCE Occupation (for Individual) INSURANCE AGENCY EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408040
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. DAVIS, MONTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19827 CYPRESS CHURCH RD
 City CYPRESS State TX Zip Code 77433-1479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORE LAB LP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349412
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1110 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, NEECE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11160 SCARLET OAKS
 City SHREVEPORT State LA Zip Code 71106-8381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2016
Transaction ID : SA11A.349012
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DAVIS, NEECE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11160 SCARLET OAKS
 City SHREVEPORT State LA Zip Code 71106-8381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370535
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DAVIS, NEECE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11160 SCARLET OAKS
 City SHREVEPORT State LA Zip Code 71106-8381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389285
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1111 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, NEECE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11160 SCARLET OAKS
 City SHREVEPORT State LA Zip Code 71106-8381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400154
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DAVIS, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 W HINSDALE AVE
 City LITTLETON State CO Zip Code 80128-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) TAX CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384366
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DAVIS, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 W HINSDALE AVE
 City LITTLETON State CO Zip Code 80128-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) TAX CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394188
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1112 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, PATRICIA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4403 W HINSDALE AVE

City LITTLETON	State CO	Zip Code 80128-2513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) TAX CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394191

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DAVIS, PATRICIA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4403 W HINSDALE AVE

City LITTLETON	State CO	Zip Code 80128-2513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) TAX CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394195

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DAVIS, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 TOWNE SQUARE APT 450

City SOUTHFIELD	State MI	Zip Code 48076-3764
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AFFORDABLE HOUSING ADVISERS INC	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367970

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1113 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 790
 City MARSHALL State NC Zip Code 28753-0790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERGREENE COMPANIES Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400125
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352753
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365049
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1114 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368292
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370432
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384120
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1115 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390810
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394536
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DAVIS, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 DEMINK ST.
 City MILFORD State MI Zip Code 48380-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412615
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1116 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 WOODSIDE DR
 City DANVILLE State CA Zip Code 94506-1137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.369017
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DAVIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 WOODSIDE DR
 City DANVILLE State CA Zip Code 94506-1137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414333
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DAVIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 WOODSIDE DR
 City DANVILLE State CA Zip Code 94506-1137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414343
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1117 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, THOMAS, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 PENNSYLVANIA AVENUE NW
 STE 1200
 City WASHINGTON State DC Zip Code 20004-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS & HARMAN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366387
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAVIS, THOMAS, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1455 PENNSYLVANIA AVENUE NW
 STE 1200
 City WASHINGTON State DC Zip Code 20004-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS & HARMAN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.420477
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DAWSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 KEY DRIVE
 City ALEXANDRIA State VA Zip Code 22302-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAWSON & ASSOC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365922
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1118 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4111 METRIC DRIVE
 City WINTER PARK State FL Zip Code 32792-6823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALTIME CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408485
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. DAY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 NATURE COURT
 City DAYTON State OH Zip Code 45440-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357959
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. DAY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 NATURE COURT
 City DAYTON State OH Zip Code 45440-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.371137
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1119 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 OREGON STREET
 City VAN State TX Zip Code 75790-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377801
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DAY, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CROWNEST DRIVE
 City PALM HARBOR State FL Zip Code 34685-1504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356190
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DAY, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CROWNEST DRIVE
 City PALM HARBOR State FL Zip Code 34685-1504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380617
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1120 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CROWSNEST DRIVE
 City PALM HARBOR State FL Zip Code 34685-1504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.392075
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. DAY, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CROWSNEST DRIVE
 City PALM HARBOR State FL Zip Code 34685-1504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DAY, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CROWSNEST DRIVE
 City PALM HARBOR State FL Zip Code 34685-1504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1121 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CROWSNEST DRIVE
 City PALM HARBOR State FL Zip Code 34685-1504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415217
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DAY, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4275 OWENS RD COTTAGE 403 403
 City EVANS State GA Zip Code 30809-3084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345856
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. DAY, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4275 OWENS RD COTTAGE 403 403
 City EVANS State GA Zip Code 30809-3084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381940
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	134.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1122 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4275 OWENS RD COTTAGE 403
403

City EVANS State GA Zip Code 30809-3084

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381949

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DAY, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4275 OWENS RD COTTAGE 403
403

City EVANS State GA Zip Code 30809-3084

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.416168

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DAY, LAVELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16098 SW 130TH TERRACE

City TIGARD State OR Zip Code 97224-3063

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368369

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1123 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, LAVELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16098 SW 130TH TERRACE
 City TIGARD State OR Zip Code 97224-3063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382518
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DAY, LAVELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16098 SW 130TH TERRACE
 City TIGARD State OR Zip Code 97224-3063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391029
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DAY, LAVELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16098 SW 130TH TERRACE
 City TIGARD State OR Zip Code 97224-3063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1124 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, LAVELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16098 SW 130TH TERRACE
 City TIGARD State OR Zip Code 97224-3063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419847
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DAY, NATHANIEL, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HILLSIDE DRIVE
 City GREENWICH State CT Zip Code 06830-4751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2016
Transaction ID : SA11A.346824
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. DAY, RONALD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2479 OCEAN STREET
 City CARLSBAD State CA Zip Code 92008-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358283
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1125 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAY, RONALD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2479 OCEAN STREET
 City CARLSBAD State CA Zip Code 92008-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382464
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DAY, RONALD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2479 OCEAN STREET
 City CARLSBAD State CA Zip Code 92008-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416135
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DAY, STEPHEN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 GLEN EAGLES DRIVE
 City LARCHMONT State NY Zip Code 10538-1206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400393
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1126 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE ANGELIS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 ROLLING MEADOWS BLVD.NO.
 City OCEAN State NJ Zip Code 07712-8556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHORE FUNDING LTD.INC. Occupation (for Individual) FINANCE EXECUTIVE-CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391713
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DE ANGELIS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 ROLLING MEADOWS BLVD.NO.
 City OCEAN State NJ Zip Code 07712-8556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHORE FUNDING LTD.INC. Occupation (for Individual) FINANCE EXECUTIVE-CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391715
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DE BEUKELAER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 SWAN SEA LANE
 City MADISON State MS Zip Code 39110-9429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DBC CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350311
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1127 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE BEUKELAER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 SWAN SEA LANE
 City MADISON State MS Zip Code 39110-9429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DBC CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398103
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DE BONO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2170 VALLEJO ST APT 301
 City SAN FRANCISCO State CA Zip Code 94123-4836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380309
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DE BONO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2170 VALLEJO ST APT 301
 City SAN FRANCISCO State CA Zip Code 94123-4836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380313
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1128 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE BONO, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2170 VALLEJO ST
APT 301

City SAN FRANCISCO State CA Zip Code 94123-4836

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.406035

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DE CARDENAS, JENNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1177 HILLSIDE ROAD

City PASADENA State CA Zip Code 91105-3307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2016

Transaction ID : SA11A.399461

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. DE FONTENAY, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 PEARL STREET

City GROTON State CT Zip Code 06340-5763

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 02 / 2016

Transaction ID : SA11A.388894

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1129 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE MAIO, DORIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11573 SNOW CREEK AVE
 City LAS VEGAS State NV Zip Code 89135-1669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353479
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DE MARK, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1339 BEA COURT
 City EAST MEADOW State NY Zip Code 11554-4504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358613
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DE RUBERTIS, GERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23461 AETNA STREET
 City WOODLAND HILLS State CA Zip Code 91367-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392745
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1130 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DE SANTIS, JOHN, F., ,

Mailing Address **5160 SE BURNING TREE CIRCLE**

City STUART	State FL	Zip Code 34997-8732
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11A.356478

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DE SANTIS, JOHN, F., ,

Mailing Address **5160 SE BURNING TREE CIRCLE**

City STUART	State FL	Zip Code 34997-8732
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11A.356481

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DE SANTIS, JOHN, F., ,

Mailing Address **5160 SE BURNING TREE CIRCLE**

City STUART	State FL	Zip Code 34997-8732
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : SA11A.410568

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1131 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE VOGEL, WILLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CHARLIE HILL RD
 City MILLERTON State NY Zip Code 12546-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350378
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DE VOGEL, WILLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CHARLIE HILL RD
 City MILLERTON State NY Zip Code 12546-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374529
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DE VOGEL, WILLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CHARLIE HILL RD
 City MILLERTON State NY Zip Code 12546-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376140
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1132 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DE VOGEL, WILLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CHARLIE HILL RD
 City MILLERTON State NY Zip Code 12546-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399644
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DE VOGEL, WILLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CHARLIE HILL RD
 City MILLERTON State NY Zip Code 12546-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400902
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DEAN, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5115 CONGRESSIONAL DR.
 City COLLEGE STATION State TX Zip Code 77845-3686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348377
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1133 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEAN, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5115 CONGRESSIONAL DR.
 City COLLEGE STATION State TX Zip Code 77845-3686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370235
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DEAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 W 2ND STREET
 City TUSTIN State CA Zip Code 92780-3642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.406531
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DEANGELO, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3811 DUMBARTON ROAD NW
 City ATLANTA State GA Zip Code 30327-2619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOULIHAN LOKEY Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414768
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1134 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEATON, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5520 LYNBROOK DR.
 City HOUSTON State TX Zip Code 77056-2009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413171
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. DEATS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WESCOTT RD
 City BEDMINSTER State NJ Zip Code 07921-2023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPLETE CONSULTING Occupation (for Individual) THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.22

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391861
 Amount of Each Receipt this Period 111.11
 Memo Item CONTRIBUTION

C. DEATS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WESCOTT RD
 City BEDMINSTER State NJ Zip Code 07921-2023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPLETE CONSULTING Occupation (for Individual) THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.22

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391862
 Amount of Each Receipt this Period 111.11
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5222.22
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1135 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383186
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390713
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400919
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1136 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403627
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403630
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411340
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1137 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEBROS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 UPPER CHURCH STREET
 City GILBERTVILLE State MA Zip Code 01031-9862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411342
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DEBUSK, AUTRY, O.V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 DEBUSK LANE
 City POWELL State TN Zip Code 37849-4703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEROYAL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407203
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. DEBUSK, CINDI, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 DEBUSK LN
 City POWELL State TN Zip Code 37849-4703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCS GROUP LLC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407202
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1138 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DECAMP, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3485 W N 179 HIGHWAY

City HASTINGS	State MI	Zip Code 49058-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411891

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. DECAMP, ROSEMARY, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18070 HAMMOND BAY STREET

City SPRING LAKE	State MI	Zip Code 49456-1564
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364403

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DECAMP, ROSEMARY, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18070 HAMMOND BAY STREET

City SPRING LAKE	State MI	Zip Code 49456-1564
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392989

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1139 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DECANDIA, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 WOODLAND HILLS DRIVE
 City TRUMBULL State CT Zip Code 06611-6363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370711
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DECANDIA, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 WOODLAND HILLS DRIVE
 City TRUMBULL State CT Zip Code 06611-6363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391168
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DECANDIA, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 WOODLAND HILLS DRIVE
 City TRUMBULL State CT Zip Code 06611-6363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391169
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1140 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DECANDIA, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 WOODLAND HILLS DRIVE
 City TRUMBULL State CT Zip Code 06611-6363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422114
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DECKER, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5232 ILEX WAY
 City DAYTON State MD Zip Code 21036-1230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361413
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DECKER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33589 SW LAUREL ROAD
 City HILLSBORO State OR Zip Code 97123-9037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373500
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1141 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DECRANE JR., ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 WAXMYRTLE WAY
 City VERO BEACH State FL Zip Code 32963-3721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370169
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DEFRANCO, ELAINE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 746 WILLOW ROAD
 City FRANKLIN SQUARE State NY Zip Code 11010-4023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394758
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DEGANI, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 4TH ST NE
 City WASHINGTON State DC Zip Code 20002-4902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL COMMUNICATIONS COMMISSION Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364793
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1142 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEGNER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROAD 350

City FLORA VISTA	State NM	Zip Code 87415-9685
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OIL & GAS EQUIPMENT CORP	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352340

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DEGNER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROAD 350

City FLORA VISTA	State NM	Zip Code 87415-9685
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OIL & GAS EQUIPMENT CORP	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375918

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DEGNER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROAD 350

City FLORA VISTA	State NM	Zip Code 87415-9685
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OIL & GAS EQUIPMENT CORP	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401445

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1143 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEGRANGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12433 CONWAY RD
 City CREVE COEUR State MO Zip Code 63141-8640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356362
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. DEGRANGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12433 CONWAY RD
 City CREVE COEUR State MO Zip Code 63141-8640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383094
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. DEGRANGE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12433 CONWAY RD
 City CREVE COEUR State MO Zip Code 63141-8640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.411331
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1144 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEHAVEN, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 MAJESTIC HILLS BLVD.
 City SPICEWOOD State TX Zip Code 78669-3088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERIPRISE FINANCIAL Occupation (for Individual) FINANCIAL ADVIXOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359874
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. DEHAVEN, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 MAJESTIC HILLS BLVD.
 City SPICEWOOD State TX Zip Code 78669-3088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERIPRISE FINANCIAL Occupation (for Individual) FINANCIAL ADVIXOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.373166
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DEHAVEN, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 MAJESTIC HILLS BLVD.
 City SPICEWOOD State TX Zip Code 78669-3088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERIPRISE FINANCIAL Occupation (for Individual) FINANCIAL ADVIXOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384775
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	218.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1145 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEHAVEN, ROSEMARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 MAJESTIC HILLS BLVD.
 City **SPICEWOOD** State **TX** Zip Code **78669-3088**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **AMERIPRISE FINANCIAL** Occupation (for Individual) **FINANCIAL ADVIXOR**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419627
 Amount of Each Receipt this Period **59.00**
 Memo Item CONTRIBUTION

B. DEHAVEN, SUE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 CHEVY CHASE DRIVE
 City **HOUSTON** State **TX** Zip Code **77063-1904**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348128
 Amount of Each Receipt this Period **30.00**
 Memo Item CONTRIBUTION

C. DEHAVEN, SUE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 CHEVY CHASE DRIVE
 City **HOUSTON** State **TX** Zip Code **77063-1904**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.376524
 Amount of Each Receipt this Period **30.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	119.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1146 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEHAVEN, SUE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 CHEVY CHASE DRIVE
 City HOUSTON State TX Zip Code 77063-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396479
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DEHAVEN, SUE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 CHEVY CHASE DRIVE
 City HOUSTON State TX Zip Code 77063-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414765
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DEINDORFER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41-36 51ST ST D-3
 City WOODSIDE State NY Zip Code 11377-4467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372809
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1147 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEINDORFER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41-36 51ST ST
D-3

City WOODSIDE	State NY	Zip Code 11377-4467
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.383639

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DEINDORFER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41-36 51ST ST
D-3

City WOODSIDE	State NY	Zip Code 11377-4467
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.383641

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DEITERS, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 TARTAN LAKES COURT

City WESTMONT	State IL	Zip Code 60559-6159
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2016

Transaction ID : SA11A.365296

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1148 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DEKERTANGUY, REBECCA, , ,

Mailing Address 960 FIFTH AVE
9B

City NEW YORK State NY Zip Code 10075-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.390153

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEKERTANGUY, REBECCA, , ,

Mailing Address 960 FIFTH AVE
9B

City NEW YORK State NY Zip Code 10075-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.390167

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DEKERTANGUY, REBECCA, , ,

Mailing Address 960 FIFTH AVE
9B

City NEW YORK State NY Zip Code 10075-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.390169

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1149 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEL PAPA, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 GULF FWY
 City TEXAS CITY State TX Zip Code 77591-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEL PAPA DISTRIBUTING Occupation (for Individual) BEVERAGE DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358055
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DELALIO, PERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 N MAIN ST
 City SOUTHAMPTON State NY Zip Code 11968-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415304
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DELAMARTER, HAROLD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7700 NE PARKWAY DR STE 300
 City VANCOUVER State WA Zip Code 98662-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESTIGE CARE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381564
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1150 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELAWDER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 635 HOWELL DRIVE
 City NEWARK State OH Zip Code 43055-1531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PARK NATIONAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357509
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DELEENHEER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CARRIAGE SQUARE
 City WACO State TX Zip Code 76708-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412786
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DELEENHEER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CARRIAGE SQUARE
 City WACO State TX Zip Code 76708-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412789
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1151 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELGADO, DIXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13132 TORRESINA TER
 City BRADENTON State FL Zip Code 34211-8420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380242
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DELGADO, DIXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13132 TORRESINA TER
 City BRADENTON State FL Zip Code 34211-8420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380243
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DELGADO, DIXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13132 TORRESINA TER
 City BRADENTON State FL Zip Code 34211-8420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414888
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1152 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELGADO, DIXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13132 TORRESINA TER
 City BRADENTON State FL Zip Code 34211-8420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414889
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DELGADO, DIXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13132 TORRESINA TER
 City BRADENTON State FL Zip Code 34211-8420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414932
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DELGADO, DIXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13132 TORRESINA TER
 City BRADENTON State FL Zip Code 34211-8420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414934
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1153 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELGADO, JOSE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12900 W. NORTH AVENUE
 City BROOKFIELD State WI Zip Code 53005-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408830
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DELISO SR, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 352 LONG HILL ST
 City SPRINGFIELD State MA Zip Code 01108-1407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387524
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DELONG, D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 CAMERON GLEN DRIVE
 City ATLANTA State GA Zip Code 30328-4745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397023
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1154 OF 5722
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELONG, MAX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 60 MISSISSIPPI RIVER BLVD N

City SAINT PAUL	State MN	Zip Code 55104-5613
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016
Transaction ID : SA11A.386553

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. DELONG, MAX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 60 MISSISSIPPI RIVER BLVD N

City SAINT PAUL	State MN	Zip Code 55104-5613
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016
Transaction ID : SA11A.418076

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. DELORENZO, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7120 MEADOW RUN LANE

City CHARLOTTE	State NC	Zip Code 28277-0420
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2016
Transaction ID : SA11A.361185

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1155 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELOUCHE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13415 KIMBERLEY LANE
 City HOUSTON State TX Zip Code 77079-6003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN RESOURCES Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368956
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DELOUCHE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13415 KIMBERLEY LANE
 City HOUSTON State TX Zip Code 77079-6003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN RESOURCES Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403882
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DELOUCHE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13415 KIMBERLEY LANE
 City HOUSTON State TX Zip Code 77079-6003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN RESOURCES Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415878
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1156 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELOYE, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24000 ALICIA PARKWAY
 324
 City MISSION VIEJO State CA Zip Code 92691-3929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374243
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DELOYE, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24000 ALICIA PARKWAY
 324
 City MISSION VIEJO State CA Zip Code 92691-3929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384282
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DELOYE, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24000 ALICIA PARKWAY
 324
 City MISSION VIEJO State CA Zip Code 92691-3929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399501
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1157 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELUCE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 JEFFERSON HEIGHTS ROAD
 City PITTSBURGH State PA Zip Code 15235-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITY UNITED PRESBYTERIAN CHURCH Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399340
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DELUCE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 JEFFERSON HEIGHTS ROAD
 City PITTSBURGH State PA Zip Code 15235-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITY UNITED PRESBYTERIAN CHURCH Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402909
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DELUCE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 JEFFERSON HEIGHTS ROAD
 City PITTSBURGH State PA Zip Code 15235-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITY UNITED PRESBYTERIAN CHURCH Occupation (for Individual) CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402917
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1158 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DELUCA, PETER, , ,

Mailing Address **609 SCARLET OAK COURT**

City APPLETON	State WI	Zip Code 54915-4512
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL PAPER	Occupation (for Individual) PROJECT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2016

Transaction ID : SA11A.354591

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DELUCA, PETER, , ,

Mailing Address **609 SCARLET OAK COURT**

City APPLETON	State WI	Zip Code 54915-4512
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL PAPER	Occupation (for Individual) PROJECT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.379065

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DELUCA, PETER, , ,

Mailing Address **609 SCARLET OAK COURT**

City APPLETON	State WI	Zip Code 54915-4512
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL PAPER	Occupation (for Individual) PROJECT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.409006

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1159 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELUCA, RUSSELL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 TRADEA TARN

City ROSWELL	State GA	Zip Code 30076-4448
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.360280

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. DELUCA, RUSSELL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 TRADEA TARN

City ROSWELL	State GA	Zip Code 30076-4448
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392540

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DELUCA, RUSSELL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 TRADEA TARN

City ROSWELL	State GA	Zip Code 30076-4448
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417190

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1160 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMAREE, DEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2025 N WABASH STREET
 City KOKOMO State IN Zip Code 46901-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYDICATE SALES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380932
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. DEMAREE, DEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2025 N WABASH STREET
 City KOKOMO State IN Zip Code 46901-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYDICATE SALES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390484
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DEMARCO, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2828 CHARLESTON OAKS DRIVE
 City RALEIGH State NC Zip Code 27614-8871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBM Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349784
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1161 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMARCO, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2828 CHARLESTON OAKS DRIVE
 City RALEIGH State NC Zip Code 27614-8871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 IBM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418357
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN'S BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BUCHBINDER TUNICK & COMPANY LLP CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352376
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN'S BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BUCHBINDER TUNICK & COMPANY LLP CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353340
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1162 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCHBINDER TUNICK & COMPANY LLP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370523
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCHBINDER TUNICK & COMPANY LLP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370524
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCHBINDER TUNICK & COMPANY LLP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375945
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1163 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCHBINDER TUNICK & COMPANY LLP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400224
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. DEMETRIUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 WEINMANN BLVD.
 City WAYNE State NJ Zip Code 07470-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCHBINDER TUNICK & COMPANY LLP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401398
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. DEMING, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 S. PRAIRIE AVE
 City ARLINGTON HEIGHTS State IL Zip Code 60005-3242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362163
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1164 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMING, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 S. PRAIRIE AVE
 City ARLINGTON HEIGHTS State IL Zip Code 60005-3242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411444
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DEMING, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 S. PRAIRIE AVE
 City ARLINGTON HEIGHTS State IL Zip Code 60005-3242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411445
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DENAULT, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4030 CALLE ARIANA
 City SAN CLEMENTE State CA Zip Code 92672-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENAULT'S HARDWARE Occupation (for Individual) HARDWARE MERCHANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349841
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1165 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENBOW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 MELROSE TRACE
 City CUMMING State GA Zip Code 30041-7284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388701
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DENBOW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 MELROSE TRACE
 City CUMMING State GA Zip Code 30041-7284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413325
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DENHAM, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2623 STEEPLECHASE WAY
 City NORCO State CA Zip Code 92860-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 636.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365792
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1166 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENHAM, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2623 STEEPLECHASE WAY
 City NORCO State CA Zip Code 92860-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 636.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366612
 Amount of Each Receipt this Period 268.00
 Memo Item CONTRIBUTION

B. DENHAM, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2623 STEEPLECHASE WAY
 City NORCO State CA Zip Code 92860-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 636.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416425
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DENHAM, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2623 STEEPLECHASE WAY
 City NORCO State CA Zip Code 92860-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 636.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.419903
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	318.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1167 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENNIS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7181 EAST CAMELBACK RD
 505
 City SCOTTSDALE State AZ Zip Code 85251-1279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TV EARS, INC Occupation (for Individual) OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408565
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DENNIS, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2317 TURN POINT ROAD
 City FRIDAY HARBOR State WA Zip Code 98250-6019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392538
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. DENSLOW, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5407 E 118TH STREET
 City TULSA State OK Zip Code 74137-8435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.396030
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1168 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENSON, CHARLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12900 FIELDING RD
 City LAKE OSWEGO State OR Zip Code 97034-2411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANINI VISTA ADVISORS LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358894
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352430
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375935
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1169 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384037
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384038
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388499
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1170 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391753
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394153
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397651
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1171 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401453
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DENTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4325 WINDSOR PKWY
 City DALLAS State TX Zip Code 75205-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM DENTON Occupation (for Individual) BUSINESS EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406022
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396903
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1172 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403780
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410095
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410100
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1173 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412307
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412568
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412572
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1174 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418225
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DEPIANO, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 GOEL RD
 City BIRMINGHAM State AL Zip Code 35244-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418240
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DEPINHO, RONALD, A., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 SHADDER WAY
 City HOUSTON State TX Zip Code 77019-1415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MD ANDERSON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2016
Transaction ID : SA11A.345254
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1175 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEPODESTA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 224 NORTH ROYAL STREET
 City ALEXANDRIA State VA Zip Code 22314-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLOMITE GROUP, LLC Occupation (for Individual) FIDUCIARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415316
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. DERBY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 BIESELIN RD
 City BELLPORT State NY Zip Code 11713-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMERALD ISLAND SUPPLY CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368440
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DERBY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 BIESELIN RD
 City BELLPORT State NY Zip Code 11713-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMERALD ISLAND SUPPLY CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384022
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1176 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DERBY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 BIESELIN RD
 City BELLPORT State NY Zip Code 11713-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMERALD ISLAND SUPPLY CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407674
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DERIEUX, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2106 CEDARFIELD LANE
 City RICHMOND State VA Zip Code 23233-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373888
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DERMER, YAFFA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2525 FLAMINGO PLACE
 City MIAMI BEACH State FL Zip Code 33140-4318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389832
 Amount of Each Receipt this Period 360.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 660.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1177 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESANTIS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1423 WATERFORD GREEN DRIVE
 City MARIETTA State GA Zip Code 30068-2910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404900
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERIC M DESSECKER Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382206
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERIC M DESSECKER Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407682
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1178 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERIC M DESSECKER Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407686
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERIC M DESSECKER Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407687
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERIC M DESSECKER Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413901
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

300.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1179 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRCE
 City MARIETTA State GA Zip Code 30066-3074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERIC M DESSECKER Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416129
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DESYLVA, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 SW MAIN ST.
 City PORTLAND State OR Zip Code 97205-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWNSTEIN RASK Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372389
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DETLEFS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 VALLEY RD
 City ATLANTA State GA Zip Code 30305-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374503
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1180 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DETLEFS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 VALLEY RD
 City ATLANTA State GA Zip Code 30305-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DETTMER, ROBERT, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 CHAPEL HILL ROAD
 City PALM BEACH State FL Zip Code 33480-4124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389533
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DETWILER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9338 BANTRY ROAD
 City EASTON State MD Zip Code 21601-5708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408626
 Amount of Each Receipt this Period 210.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1310.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1181 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEUTSCH, PAUL, C., DR., DVM
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2843 HIGHWAY K

City SAINT CLAIR	State MO	Zip Code 63077-3575
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.356560

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. DEVINE, DONNA, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 155 E RIVIERA DRIVE

City LINDENHURST	State NY	Zip Code 11757-6708
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392582

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. DEVINE, TRACEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 116 COASTAL OAK CIRCLE

City PONTE VEDRA	State FL	Zip Code 32082-2700
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUNTRUST BANK	Occupation (for Individual) INVESTMENT RESEARCH ANALYST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407634

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1182 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEVITT, BLAKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 W. GULF DR.
 E102
 City SANIBEL State FL Zip Code 33957-5651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407395
 Amount of Each Receipt this Period
 101.00
 Memo Item
 CONTRIBUTION

B. DEVOS, DANIEL, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 OTTAWA AVE. NW STE. 500
 City GRAND RAPIDS State MI Zip Code 49503-2882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DP FOX VENTURES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421178
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. DEVOS, DOUGLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 OTTAWA AVE NW STE. 500
 City GRAND RAPIDS State MI Zip Code 49503-2882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALTICOR Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 45000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421181
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50101.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1183 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEVOS, ELISABETH, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 OTTAWA AVE. NW STE. 500
 City GRAND RAPIDS State MI Zip Code 49503-2882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINDQUEST GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421177
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. DEVOS, HELEN, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 OTTAWA AVE. NW STE. 500
 City GRAND RAPIDS State MI Zip Code 49503-2882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421176
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. DEVOS, MARIA, P., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 OTTAWA AVE. NW STE. 500
 City GRAND RAPIDS State MI Zip Code 49503-2882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421182
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1184 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DEVOS, PAMELLA, G., MRS.,

Mailing Address 126 OTTAWA AVE. NW STE. 500

City GRAND RAPIDS State MI Zip Code 49503-2882

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.421179

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEVOS, RICHARD, , MR., JR.

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS State MI Zip Code 49503-2882

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RDV CORPORATION Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
45000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.421183

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DEVOS, RICHARD, M., MR., SR

Mailing Address 126 OTTAWA AVENUE NW, STE. 500

City GRAND RAPIDS State MI Zip Code 49503-2882

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RDV CORP Occupation (for Individual) CHAIRMAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
45000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.421174

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1185 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DEVOS, SUZANNE, CHERYL, MS.,

Mailing Address 126 OTTAWA AVE. NW STE. 500

City GRAND RAPIDS State MI Zip Code 49503-2882

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RDV CORP Occupation (for Individual) DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.421180

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEVRIES, JAMES, , ,

Mailing Address 15 AVENUE DE LA MER APT 2702

City PALM COAST State FL Zip Code 32137-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11A.356434

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DEVRIES, JAMES, , ,

Mailing Address 15 AVENUE DE LA MER APT 2702

City PALM COAST State FL Zip Code 32137-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11A.358964

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1186 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEVRIES, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 AVENUE DE LA MER
APT 2702

City PALM COAST State FL Zip Code 32137-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2016

Transaction ID : SA11A.358965

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DEVRIES, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 AVENUE DE LA MER
APT 2702

City PALM COAST State FL Zip Code 32137-2291

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2016

Transaction ID : SA11A.387864

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DEW, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 575 OSGOOD ST.
1402

City NORTH ANDOVER State MA Zip Code 01845-1975

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : SA11A.344442

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1187 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEW, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 575 OSGOOD ST.
1402

City NORTH ANDOVER State MA Zip Code 01845-1975

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2016

Transaction ID : SA11A.345796

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DEW, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 575 OSGOOD ST.
1402

City NORTH ANDOVER State MA Zip Code 01845-1975

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2016

Transaction ID : SA11A.352543

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DEW, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 575 OSGOOD ST.
1402

City NORTH ANDOVER State MA Zip Code 01845-1975

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2016

Transaction ID : SA11A.375989

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1188 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEWEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 RIMROCK WAY
 City MISSOULA State MT Zip Code 59803-2317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349905
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. DEWITT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3146 DAHLIA WAY
 City NAPLES State FL Zip Code 34105-3046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350419
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373320
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1189 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383688

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

B. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383689

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

C. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383700

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	73.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1190 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383710

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383712

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DEYS, ESTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 STATE ROUTE 31

City PALMYRA	State NY	Zip Code 14522-9719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
348.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398877

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1191 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398878
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418955
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418961
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1192 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEYS, ESTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 STATE ROUTE 31
 City PALMYRA State NY Zip Code 14522-9719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419431
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DI MARCO, ATTILIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 DEER HOLLOW CIRCLE
 City LONGWOOD State FL Zip Code 32779-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349558
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DI MARCO, ATTILIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 DEER HOLLOW CIRCLE
 City LONGWOOD State FL Zip Code 32779-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417855
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1193 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DI MARCO, ATTILIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2164 DEER HOLLOW CIRCLE
 City LONGWOOD State FL Zip Code 32779-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417859
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DICAPRIO, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 WICKHAM ROAD
 City GARDEN CITY State NY Zip Code 11530-2516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364424
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DICHARRY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 ISLAND DRIVE
 City SLIDELL State LA Zip Code 70458-4212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOURCE PRODUCTION & EQUIPMENT Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.422712
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1194 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DICK, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 392 BOXBERRY HILL RD

City HATCHVILLE	State MA	Zip Code 02536-4149
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WOODS HOLE OCEANOGRAPHIC INSTITUTION	Occupation (for Individual) SCIENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364795

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. DICK, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 392 BOXBERRY HILL RD

City HATCHVILLE	State MA	Zip Code 02536-4149
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WOODS HOLE OCEANOGRAPHIC INSTITUTION	Occupation (for Individual) SCIENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2016

Transaction ID : SA11A.393684

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. DICK, KRISTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8239 HIGHWAY 128

City HEALDSBURG	State CA	Zip Code 95448-8024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389627

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1195 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DICK, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4849 N WISHON AVE
 City FRESNO State CA Zip Code 93704-3129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSPIRATION CRUISES & TOURS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386389
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DICKINSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11706 MERCY BLVD
 City SAVANNAH State GA Zip Code 31419-1751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAVANNAH PSYCHOLOGICAL CONSULTANTS Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412730
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. DICKSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1276 SOLDIERS CREEK
 City GRANTS PASS State OR Zip Code 97526-7868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIONS GATE Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374497
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1196 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DICKSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1276 SOLDIERS CREEK
 City GRANTS PASS State OR Zip Code 97526-7868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIONS GATE Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410033
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DICKSON, JIM, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338 WHITTIER DR
 City NEENAH State WI Zip Code 54956-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387813
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DICKSON, JIM, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1338 WHITTIER DR
 City NEENAH State WI Zip Code 54956-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394377
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1197 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEDERICH, NORMAN, F., DR., PH.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9004 TIMBER EDGE DR

City NORTH RIDGEVILLE	State OH	Zip Code 44039-6321
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.351045

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DIEDERICH, NORMAN, F., DR., PH.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9004 TIMBER EDGE DR

City NORTH RIDGEVILLE	State OH	Zip Code 44039-6321
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.373523

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DIEDERICH, NORMAN, F., DR., PH.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9004 TIMBER EDGE DR

City NORTH RIDGEVILLE	State OH	Zip Code 44039-6321
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.378756

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1198 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEDERICH, NORMAN, F., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9004 TIMBER EDGE DR
 City NORTH RIDGEVILLE State OH Zip Code 44039-6321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383656
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DIEDERICH, NORMAN, F., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9004 TIMBER EDGE DR
 City NORTH RIDGEVILLE State OH Zip Code 44039-6321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.401029
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DIEDERICH, NORMAN, F., DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9004 TIMBER EDGE DR
 City NORTH RIDGEVILLE State OH Zip Code 44039-6321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.402468
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1199 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEDERICH, NORMAN, F., DR., PH.D.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9004 TIMBER EDGE DR

City NORTH RIDGEVILLE	State OH	Zip Code 44039-6321
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11A.415388

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DIFENDERFER, JAMES, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2373 FLENTWOOD DRIVE
2373 FLENTWOOD DRIVE

City SARASOTA	State FL	Zip Code 34238-3008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016

Transaction ID : SA11A.349104

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. DIFENDERFER, JAMES, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2373 FLENTWOOD DRIVE
2373 FLENTWOOD DRIVE

City SARASOTA	State FL	Zip Code 34238-3008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11A.397588

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1200 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEFENDERFER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 FLENTWOOD DRIVE
 2373 FLENTWOOD DRIVE
 City SARASOTA State FL Zip Code 34238-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412889
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DIEFENDERFER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 FLENTWOOD DRIVE
 2373 FLENTWOOD DRIVE
 City SARASOTA State FL Zip Code 34238-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418040
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DIEFENDERFER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 FLENTWOOD DRIVE
 2373 FLENTWOOD DRIVE
 City SARASOTA State FL Zip Code 34238-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418057
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1201 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIEHL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 SAINT CHARLES WAY
 City YORK State PA Zip Code 17402-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 08 / 2016**
Transaction ID : SA11A.361345
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. DIEHL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 SAINT CHARLES WAY
 City YORK State PA Zip Code 17402-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407119
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DIERCKSMIEIER, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21770 DAVIDSON ROAD
 City WAUKESHA State WI Zip Code 53186-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415818
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1202 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIERCKSMIEIER, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 21770 DAVIDSON ROAD

City WAUKESHA	State WI	Zip Code 53186-4008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415838

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DIERCKSMIEIER, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 21770 DAVIDSON ROAD

City WAUKESHA	State WI	Zip Code 53186-4008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417858

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DIERKES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6183 TALMADGE RUN NW

City ACWORTH	State GA	Zip Code 30101-9500
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.366477

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1203 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIESTELHORST, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 GERBER WOODS DRIVE
 City EDWARDSVILLE State IL Zip Code 62025-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349230
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DIESTELHORST, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 GERBER WOODS DRIVE
 City EDWARDSVILLE State IL Zip Code 62025-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349231
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DIESTELHORST, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 GERBER WOODS DRIVE
 City EDWARDSVILLE State IL Zip Code 62025-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380282
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1204 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384153

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384156

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DIESTELHORST, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 GERBER WOODS DRIVE

City EDWARDSVILLE	State IL	Zip Code 62025-3101
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390162

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1205 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIESTELHORST, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 GERBER WOODS DRIVE
 City EDWARDSVILLE State IL Zip Code 62025-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394238
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DIESTELHORST, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 GERBER WOODS DRIVE
 City EDWARDSVILLE State IL Zip Code 62025-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402758
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DIESTELHORST, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 GERBER WOODS DRIVE
 City EDWARDSVILLE State IL Zip Code 62025-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415395
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1206 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIETHRICH, JOANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1200

City GRIDLEY	State CA	Zip Code 95948-1200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386791

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DIETHRICH, JOANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1200

City GRIDLEY	State CA	Zip Code 95948-1200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386795

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DIETHRICH, JOANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1200

City GRIDLEY	State CA	Zip Code 95948-1200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415702

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1207 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIETTERLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 N. MALDEN AVE.
 City FULLERTON State CA Zip Code 92832-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 09 / 2016
Transaction ID : SA11A.363751
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. DIETTERLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 N. MALDEN AVE.
 City FULLERTON State CA Zip Code 92832-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405451
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. DIETTERLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 N. MALDEN AVE.
 City FULLERTON State CA Zip Code 92832-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405455
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1208 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIETTERLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 N. MALDEN AVE.
 City FULLERTON State CA Zip Code 92832-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411484
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DIETZ, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5142 HARVARD AVE.
 City WESTMINSTER State CA Zip Code 92683-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386190
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. DIETZ, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5142 HARVARD AVE.
 City WESTMINSTER State CA Zip Code 92683-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386191
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1209 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIETZE, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 EAST 64 STREET
 4B
 City NEW YORK State NY Zip Code 10065-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394414
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. DIETZE, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 EAST 64 STREET
 4B
 City NEW YORK State NY Zip Code 10065-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394415
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. DIETZE, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 EAST 64 STREET
 4B
 City NEW YORK State NY Zip Code 10065-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403805
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1210 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIGIORGIO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4079 CIRCLE CT

City MILFORD	State PA	Zip Code 18337-9307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
364.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : SA11A.348515

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DIGIORGIO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4079 CIRCLE CT

City MILFORD	State PA	Zip Code 18337-9307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
364.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.349584

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DIGIORGIO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4079 CIRCLE CT

City MILFORD	State PA	Zip Code 18337-9307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
364.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : SA11A.357691

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1211 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIGIORGIO, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4079 CIRCLE CT
 City MILFORD State PA Zip Code 18337-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402978
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DIGIORGIO, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4079 CIRCLE CT
 City MILFORD State PA Zip Code 18337-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402991
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DIGIORGIO, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4079 CIRCLE CT
 City MILFORD State PA Zip Code 18337-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420287
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1212 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DILEO, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 SPYGLASS LANE
 City JUPITER State FL Zip Code 33477-4037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379876
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DILL, JOYCE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 WEST CENTER ST
 City CINCINNATI State OH Zip Code 45227-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362824
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DILL, JOYCE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 WEST CENTER ST
 City CINCINNATI State OH Zip Code 45227-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374823
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1213 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DILL, JOYCE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 WEST CENTER ST
 City CINCINNATI State OH Zip Code 45227-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.379933
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. DILL, JOYCE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 WEST CENTER ST
 City CINCINNATI State OH Zip Code 45227-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 09 / 08 / 2016
Transaction ID : SA11A.391805
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. DILL, JOYCE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 WEST CENTER ST
 City CINCINNATI State OH Zip Code 45227-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412822
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1214 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DILL, JOYCE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 WEST CENTER ST
 City CINCINNATI State OH Zip Code 45227-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412824
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DILLARD, JACK, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 E 5TH STREET APT 530
 City AUSTIN State TX Zip Code 78701-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379515
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. DILLARD, JACK, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 E 5TH STREET APT 530
 City AUSTIN State TX Zip Code 78701-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383275
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1215 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DILLARD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3281 DEER CHASE RUN
 City LONGWOOD State FL Zip Code 32779-3175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407538
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. DILLEY, GAIL, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 858
 City MANNFORD State OK Zip Code 74044-0858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358642
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. DILLON, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 BURLESO
 City SAN MARCOS State TX Zip Code 78666-4232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.409040
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1216 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DILLON, KATHRYN, , ,

Mailing Address **1000 BURLESO**

City SAN MARCOS	State TX	Zip Code 78666-4232
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 24 / 2016

Transaction ID : SA11A.409042

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DILLON, KATHRYN, , ,

Mailing Address **1000 BURLESO**

City SAN MARCOS	State TX	Zip Code 78666-4232
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 24 / 2016

Transaction ID : SA11A.409045

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DILLON, KATHRYN, , ,

Mailing Address **1000 BURLESO**

City SAN MARCOS	State TX	Zip Code 78666-4232
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 24 / 2016

Transaction ID : SA11A.409046

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1217 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DILLON, RICHARD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15703 NW FAIR ACRES DR
 City VANCOUVER State WA Zip Code 98685-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.356854
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350336
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359533
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1218 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372287
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374358
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384315
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1219 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIMICK, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1737 FAIRWAY LANE

City SPANISH FORK	State UT	Zip Code 84660-9499
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.384942

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DIMICK, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1737 FAIRWAY LANE

City SPANISH FORK	State UT	Zip Code 84660-9499
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2016

Transaction ID : SA11A.392051

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. DIMICK, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1737 FAIRWAY LANE

City SPANISH FORK	State UT	Zip Code 84660-9499
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2016

Transaction ID : SA11A.396640

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1220 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402765
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402767
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DIMICK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 FAIRWAY LANE
 City SPANISH FORK State UT Zip Code 84660-9499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418583
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1221 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIMICK, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1737 FAIRWAY LANE

City SPANISH FORK	State UT	Zip Code 84660-9499
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418601

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DIMOND, RITA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 POND RD

City CHERRY HILLS VILLA	State CO	Zip Code 80113-6110
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.361550

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. DINEEN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2525 CAMPDEN LANE

City NORTHBROOK	State IL	Zip Code 60062-8108
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414599

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1222 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DINGER, BEATRICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 VILLA LANE

City LARCHMONT	State NY	Zip Code 10538-1227
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) NONE
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358781

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. DINGER, BEATRICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 VILLA LANE

City LARCHMONT	State NY	Zip Code 10538-1227
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) NONE
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417352

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DINOVI, ANTHONY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 RAVINE RD

City WELLESLEY	State MA	Zip Code 02481-1426
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THOMAS LEE PARTNERS	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.402089

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1223 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DINSMORE, CHARLES, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3748
 City ENID State OK Zip Code 73702-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OIL GAS PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354121
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DIOTTE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11119 W. CLARKE STREET
 City WAUWATOSA State WI Zip Code 53226-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARLEY-DAVIDSON MOTOR CO Occupation (for Individual) PROGRAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387277
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DIOTTE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11119 W. CLARKE STREET
 City WAUWATOSA State WI Zip Code 53226-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARLEY-DAVIDSON MOTOR CO Occupation (for Individual) PROGRAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404004
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1224 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIPPOLD, EMMITT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 W MAIN ST
 City MIDDLETOWN State DE Zip Code 19709-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FELIXCHEM.COM Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DISALVO, KAREN, A., MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 OLD ALBANY POST ROAD
 City GARRISON State NY Zip Code 10524-3416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERSONS DISALVO AGENCY INC Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354141
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DISKO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9136 LEITH DRIVE
 City DUBLIN State OH Zip Code 43017-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 362.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396679
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1225 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DISPALTRO, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 GRAND CAY DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33418-8400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347630
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DISPALTRO, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 GRAND CAY DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33418-8400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349480
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DISPALTRO, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 GRAND CAY DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33418-8400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355703
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1226 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DISPALTRO, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 GRAND CAY DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33418-8400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DISPALTRO, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 GRAND CAY DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33418-8400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390615
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DITTBENNER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31915 300TH AVE
 City MORGAN State MN Zip Code 56266-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) PART TIME CLERK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.396896
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1227 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DITTBENNER, JAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31915 300TH AVE

City MORGAN	State MN	Zip Code 56266-3021
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USPS	Occupation (for Individual) PART TIME CLERK
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405504

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DITTBENNER, JAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31915 300TH AVE

City MORGAN	State MN	Zip Code 56266-3021
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USPS	Occupation (for Individual) PART TIME CLERK
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405505

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.348224

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1228 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIVANY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 WHITEROCK AVENUE
 City PLEASANT GAP State PA Zip Code 16823-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349652
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. DIVANY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 WHITEROCK AVENUE
 City PLEASANT GAP State PA Zip Code 16823-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362543
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. DIVANY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 WHITEROCK AVENUE
 City PLEASANT GAP State PA Zip Code 16823-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363831
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1229 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364808

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.373295

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. DIVANY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 WHITEROCK AVENUE

City PLEASANT GAP	State PA	Zip Code 16823-3511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.374124

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1230 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIVANY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 WHITEROCK AVENUE
 City PLEASANT GAP State PA Zip Code 16823-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387167
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DIVANY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 WHITEROCK AVENUE
 City PLEASANT GAP State PA Zip Code 16823-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398517
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DIVANY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 WHITEROCK AVENUE
 City PLEASANT GAP State PA Zip Code 16823-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398518
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1231 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIVANY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 WHITEROCK AVENUE
 City PLEASANT GAP State PA Zip Code 16823-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419395
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DIX, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 38065
 City COLORADO SPRINGS State CO Zip Code 80937-8065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357634
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DIX, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 38065
 City COLORADO SPRINGS State CO Zip Code 80937-8065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372553
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1232 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIX, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 38065
 City COLORADO SPRINGS State CO Zip Code 80937-8065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374612
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. DIX, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 38065
 City COLORADO SPRINGS State CO Zip Code 80937-8065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.385192
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. DIX, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 38065
 City COLORADO SPRINGS State CO Zip Code 80937-8065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399652
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1233 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 228 ROSNEY FARM LANE
 City DILLWYN State VA Zip Code 23936-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376850
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DIXON, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1379 COMPTON RD
 City MURFREESBORO State TN Zip Code 37130-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351985
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DIXON, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1379 COMPTON RD
 City MURFREESBORO State TN Zip Code 37130-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351986
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1234 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1379 COMPTON RD
 City MURFREESBORO State TN Zip Code 37130-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381962
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DIXON, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1379 COMPTON RD
 City MURFREESBORO State TN Zip Code 37130-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386229
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DIXON, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1379 COMPTON RD
 City MURFREESBORO State TN Zip Code 37130-6822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419037
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1235 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 E. MISSION RD.
 SPACE 106
 City FALLBROOK State CA Zip Code 92028-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358022
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DIXON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 E. MISSION RD.
 SPACE 106
 City FALLBROOK State CA Zip Code 92028-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368319
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DIXON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 E. MISSION RD.
 SPACE 106
 City FALLBROOK State CA Zip Code 92028-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372891
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1236 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 E. MISSION RD.
 SPACE 106
 City FALLBROOK State CA Zip Code 92028-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387991
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DIXON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 E. MISSION RD.
 SPACE 106
 City FALLBROOK State CA Zip Code 92028-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387994
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DIXON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 E. MISSION RD.
 SPACE 106
 City FALLBROOK State CA Zip Code 92028-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391734
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1237 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9098 PARK AVE
 City MANASSAS State VA Zip Code 20110-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373204
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DIXON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9098 PARK AVE
 City MANASSAS State VA Zip Code 20110-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373221
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DIXON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9098 PARK AVE
 City MANASSAS State VA Zip Code 20110-4355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373222
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1238 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9098 PARK AVE

City MANASSAS	State VA	Zip Code 20110-4355
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405280

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. DIXON, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9098 PARK AVE

City MANASSAS	State VA	Zip Code 20110-4355
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405280

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DIXON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 STONEGATE LANE

City WINSTON SALEM	State NC	Zip Code 27104-1820
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381391

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1239 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIXON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 SAINTSBURY DRIVE
 City LAS VEGAS State NV Zip Code 89144-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401681
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. DIXON, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1170 HAWKWEED LANE
 City LAKE FOREST State IL Zip Code 60045-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389821
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. DIXON, WILLIAM, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 S DITHRIDGE STREET, APT 903 APT. 903
 City PITTSBURGH State PA Zip Code 15213-3519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361377
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1240 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOAN, REBECCA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 PALATINE CT.
 City THE VILLAGES State FL Zip Code 32162-7119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369894
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DOAN, REBECCA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 PALATINE CT.
 City THE VILLAGES State FL Zip Code 32162-7119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DOAN, REBECCA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 PALATINE CT.
 City THE VILLAGES State FL Zip Code 32162-7119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422253
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1241 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOANE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8502 BUCKHANNON DR
 City POTOMAC State MD Zip Code 20854-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRUCTURAL ENGINEER Occupation (for Individual) SIMPLEX STRUCTURES, LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413421
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

B. DOBMEIER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 354 ENGLEWOOD AVE
 City BUFFALO State NY Zip Code 14223-2806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOBMEIER JANITOR SUPPLY Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379409
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. DOBROZSI, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 5TH ST SE
 City WASHINGTON State DC Zip Code 20003-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346083
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1242 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DODDRIDGE, WILLIAM, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13562 ISLEWOOD DR
 City ANACORTES State WA Zip Code 98221-8597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AWDC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.347222
 Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

B. DODGE, ANNE, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 KAULA LANE
 City BONITA SPRINGS State FL Zip Code 34134-8523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6650.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.387330
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. DODGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17544 DOLOROSA DR
 City ORLAND PARK State IL Zip Code 60467-8225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLIMAN Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408391
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1243 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DODGE, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 BAREFOOT BEACH BLVD
 201
 City BONITA SPRINGS State FL Zip Code 34134-8598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356372
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DODGE, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 BAREFOOT BEACH BLVD
 201
 City BONITA SPRINGS State FL Zip Code 34134-8598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364863
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DODGE, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 BAREFOOT BEACH BLVD
 201
 City BONITA SPRINGS State FL Zip Code 34134-8598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390105
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1244 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DODGE, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 BAREFOOT BEACH BLVD
 201
 City BONITA SPRINGS State FL Zip Code 34134-8598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390106
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DODGE, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 BAREFOOT BEACH BLVD
 201
 City BONITA SPRINGS State FL Zip Code 34134-8598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398833
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DODGE, MARY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 262 BAREFOOT BEACH BLVD
 201
 City BONITA SPRINGS State FL Zip Code 34134-8598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411523
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1245 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DODSON, JIMMY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4222 FM 665
 City ROBSTOWN State TX Zip Code 78380-4390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345257
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. DOERGER, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 DRYSDALE DRIVE
 City LOS GATOS State CA Zip Code 95032-4851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBAY INC. Occupation (for Individual) EBAY INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346222
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DOGGETT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1206 HUNTINGTON DR
 City RICHARDSON State TX Zip Code 75080-2929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J DOGGETT INVESTMENTS INC. Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390348
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1246 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DOGGETT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1206 HUNTINGTON DR
 City RICHARDSON State TX Zip Code 75080-2929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J DOGGETT INVESTMENTS INC. Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390882
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DOHERTY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3704 CRAGMONT AVENUE
 City DALLAS State TX Zip Code 75205-4313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417436
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. DOHERTY, THOMAS, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 SYLVAN ST
 City RUTHERFORD State NJ Zip Code 07070-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERCURY PUBLIC STRATEGY Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398475
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1247 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOHMEN, ERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5110 COUNTRY CLUB BEACH RD
 City PORT WASHINGTON State WI Zip Code 53074-9642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378925
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DOHMEN, ERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5110 COUNTRY CLUB BEACH RD
 City PORT WASHINGTON State WI Zip Code 53074-9642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408978
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362532
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1248 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368682
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372360
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DOLAN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 WEST LAUREL AVENUE
 City LAKE FOREST State IL Zip Code 60045-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOLAN MCENIRY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385060
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1249 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLAN, DANIEL, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 WEST LAUREL AVENUE

City LAKE FOREST	State IL	Zip Code 60045-1116
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOLAN MCENIRY	Occupation (for Individual) INVESTMENT MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400916

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. DOLAN, DANIEL, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 WEST LAUREL AVENUE

City LAKE FOREST	State IL	Zip Code 60045-1116
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOLAN MCENIRY	Occupation (for Individual) INVESTMENT MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409532

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. DOLAN, EVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 WINDWARD WAY

City CHAGRIN FALLS	State OH	Zip Code 44023-6705
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392657

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1250 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLAN, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1420 SHERIDAN ROAD, APT 5E

City WILMETTE	State IL	Zip Code 60091-1850
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2016
Transaction ID : SA11A.392567

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. DOLES, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5725 WHISPERING WILLOW WAY

City FT. MYERS	State FL	Zip Code 33908-4508
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016
Transaction ID : SA11A.350939

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. DOLES, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5725 WHISPERING WILLOW WAY

City FT. MYERS	State FL	Zip Code 33908-4508
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2016
Transaction ID : SA11A.392070

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1251 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOLES, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5725 WHISPERING WILLOW WAY
 City FT. MYERS State FL Zip Code 33908-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414067
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DOMSA, SORIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83-60 118TH ST. 1E
 City KEW GARDENS State NY Zip Code 11415-2372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAE SYSTEMS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352519
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DOMSA, SORIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83-60 118TH ST. 1E
 City KEW GARDENS State NY Zip Code 11415-2372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAE SYSTEMS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374867
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1252 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOMSA, SORIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83-60 118TH ST.
 1E
 City KEW GARDENS State NY Zip Code 11415-2372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAE SYSTEMS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419022
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. DONAGHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 NORTH ROAD
 City DARIEN State CT Zip Code 06820-6216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383324
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. DONAHOE, PATRICK, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9155 HARVEST HOMES ST
 City LAS VEGAS State NV Zip Code 89123-5366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICL, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 33400.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.375451
 Amount of Each Receipt this Period 33400.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	34425.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1253 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DONALDSON, RICHARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22701 LAKE ROAD
305A

City ROCKY RIVER State OH Zip Code 44116-1058

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2016

Transaction ID : SA11A.352484

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DONALDSON, RICHARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22701 LAKE ROAD
305A

City ROCKY RIVER State OH Zip Code 44116-1058

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2016

Transaction ID : SA11A.375923

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. DONATELLO, LAURA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 JOHN HANCOCK BLVD.

City LINCOLN UNIVERSITY State PA Zip Code 19352-9311

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11A.358455

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1254 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONELSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HALTON GREEN WAY
 City GREENVILLE State SC Zip Code 29607-6606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID DONELSON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390057
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DONELSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HALTON GREEN WAY
 City GREENVILLE State SC Zip Code 29607-6606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID DONELSON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390058
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DONELSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HALTON GREEN WAY
 City GREENVILLE State SC Zip Code 29607-6606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID DONELSON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391813
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 530.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1255 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONELSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HALTON GREEN WAY
 City GREENVILLE State SC Zip Code 29607-6606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID DONELSON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399312
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DONELSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HALTON GREEN WAY
 City GREENVILLE State SC Zip Code 29607-6606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID DONELSON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406130
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DONELSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HALTON GREEN WAY
 City GREENVILLE State SC Zip Code 29607-6606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID DONELSON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406131
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1256 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DONELSON, DAVID, , ,

Mailing Address **1 HALTON GREEN WAY**

City GREENVILLE	State SC	Zip Code 29607-6606
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID DONELSON	Occupation (for Individual) PHYSICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407933

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DONELSON, DAVID, , ,

Mailing Address **1 HALTON GREEN WAY**

City GREENVILLE	State SC	Zip Code 29607-6606
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID DONELSON	Occupation (for Individual) PHYSICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412017

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DONELSON, DAVID, , ,

Mailing Address **1 HALTON GREEN WAY**

City GREENVILLE	State SC	Zip Code 29607-6606
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID DONELSON	Occupation (for Individual) PHYSICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412028

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1257 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DONELSON, DAVID, , ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2016 Transaction ID : SA11A.412029
Mailing Address 1 HALTON GREEN WAY			Amount of Each Receipt this Period 25.00
City GREENVILLE	State SC	Zip Code 29607-6606	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) DAVID DONELSON	Occupation (for Individual) PHYSICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DONNELLY, KATHRYN, , ,			Date of Receipt MM / DD / YYYY 08 / 16 / 2016 Transaction ID : SA11A.368139
Mailing Address 1400 WAVERLY RD UNIT V63			Amount of Each Receipt this Period 250.00
City GLADWYNE	State PA	Zip Code 19035-1297	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DONNLEY, DENEEN, , ,			Date of Receipt MM / DD / YYYY 08 / 03 / 2016 Transaction ID : SA11A.360255
Mailing Address 107 EATON			Amount of Each Receipt this Period 2700.00
City SAN ANTONIO	State TX	Zip Code 78209-5313	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) USAA	Occupation (for Individual) EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2700.00		

SUBTOTAL of Receipts This Page (optional).....▶	2975.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1258 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONOGHUE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23419 WILDERNESS CV
 City SAN ANTONIO State TX Zip Code 78261-3029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RENTAL MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356529
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DONOHUE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 770599
 City OCALA State FL Zip Code 34477-0599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380357
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DONOHUE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 770599
 City OCALA State FL Zip Code 34477-0599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411241
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1259 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONOHOE, MICHAEL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14504 CAMBRIDGE CIRCLE
 City LAUREL State MD Zip Code 20707-3726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GIEHENS BLDG TECH OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364237
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

B. DONOHOE, MICHAEL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14504 CAMBRIDGE CIRCLE
 City LAUREL State MD Zip Code 20707-3726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GIEHENS BLDG TECH OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396193
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. DONOVAN, DAVID, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5523 STATE FARM RD
 City VOORHEESVILLE State NY Zip Code 12186-5501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW YORK STATE BROADCASTERS ASSOCIATIO PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383561
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1260 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DONOVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 WYNDHAM LAKES DRIVE
 City ODESSA State FL Zip Code 33556-4320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11A.401596
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAKDALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1273.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.383194
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAKDALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1273.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.413511
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 505.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1261 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAKDALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1273.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413512
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

B. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAKDALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1273.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413513
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. DOODY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAKDALE ROAD
 City ARNOLD State MD Zip Code 21012-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1273.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413516
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1018.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1262 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOOLEY, RICHARD, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 PALENCIA COURT
 City CHULA VISTA State CA Zip Code 91910-8065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351134
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. DOORNBOS, BILLY, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 696
 City NEDERLAND State TX Zip Code 77627-0696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C DOORNBOS, INC. Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354972
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. DOORNBOS, BILLY, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 696
 City NEDERLAND State TX Zip Code 77627-0696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C DOORNBOS, INC. Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354973
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1263 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOORNINK, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 UPLAND DRIVE #4063
 City HOUSTON State TX Zip Code 77043-4718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3998.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407726
 Amount of Each Receipt this Period 999.00
 Memo Item CONTRIBUTION

B. DOORNINK, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 UPLAND DRIVE #4063
 City HOUSTON State TX Zip Code 77043-4718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3998.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407732
 Amount of Each Receipt this Period 999.00
 Memo Item CONTRIBUTION

C. DOORNINK, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 UPLAND DRIVE #4063
 City HOUSTON State TX Zip Code 77043-4718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3998.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409466
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2998.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1264 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOORNINK, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1321 UPLAND DRIVE #4063
 City HOUSTON State TX Zip Code 77043-4718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3998.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409467
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DORAN, HAROLD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1121 STATE ROUTE 94 W
 City MURRAY State KY Zip Code 42071-4600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346993
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DORAU, MARY, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 SOUTHERN OAK CIR.
 City HARTLAND State WI Zip Code 53029-8005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404040
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1265 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DORAU, MARY, E., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 579 SOUTHERN OAK CIR.
 City HARTLAND State WI Zip Code 53029-8005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412902
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DORMAN, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 S COLUMBINE STREET
 City DENVER State CO Zip Code 80210-6117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349734
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DORMAN, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 S COLUMBINE STREET
 City DENVER State CO Zip Code 80210-6117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387769
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1266 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DORR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 BURR OAKS DRIVE
 City WEST DES MOINES State IA Zip Code 50266-6637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENFENCE Occupation (for Individual) SENIOR VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392069
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. DOSS, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16725 TADDINGTON PLACE
 City LOUISVILLE State KY Zip Code 40245-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349262
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. DOSS, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16725 TADDINGTON PLACE
 City LOUISVILLE State KY Zip Code 40245-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364790
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1267 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOSS, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16725 TADDINGTON PLACE
 City LOUISVILLE State KY Zip Code 40245-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374751
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. DOSS, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16725 TADDINGTON PLACE
 City LOUISVILLE State KY Zip Code 40245-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384102
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. DOSS, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16725 TADDINGTON PLACE
 City LOUISVILLE State KY Zip Code 40245-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394465
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1268 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOSS, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16725 TADDINGTON PLACE
 City LOUISVILLE State KY Zip Code 40245-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399559
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DOSS, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16725 TADDINGTON PLACE
 City LOUISVILLE State KY Zip Code 40245-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410754
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DOTSON, GERALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 HORIZON HILL ROAD
 City YACHATS State OR Zip Code 97498-8440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347772
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1269 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOTSON, GERALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 HORIZON HILL ROAD
 City YACHATS State OR Zip Code 97498-8440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.361042
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOUGHERTY, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 S 5TH AVENUE
 City SIOUX FALLS State SD Zip Code 57105-5005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401781
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DOUGHERTY, NANCY, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 JUDSON STREET APT 16B
 City EDISON State NJ Zip Code 08837-2460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354129
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1270 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUGHERTY, NANCY, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 JUDSON STREET
APT 16B

City EDISON State NJ Zip Code 08837-2460

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376617

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. DOUGHERTY, NANCY, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 JUDSON STREET
APT 16B

City EDISON State NJ Zip Code 08837-2460

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417404

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. DOUGLAS, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8025 SW 54TH AVE

City PORTLAND State OR Zip Code 97219-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MANAGED HEALTH ASSOC. Occupation (for Individual) EXECUTIVE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360266

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1271 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUGLAS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1440 N LAKE SHORE DR
 20E
 City CHICAGO State IL Zip Code 60610-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383666
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DOUGLAS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1440 N LAKE SHORE DR
 20E
 City CHICAGO State IL Zip Code 60610-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415064
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DOUMAUX JR, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 WILKIE DRIVE
 City CHARLESTON State WV Zip Code 25314-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386150
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1272 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUMAUX JR, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 WILKIE DRIVE
 City CHARLESTON State WV Zip Code 25314-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394462
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DOUMAUX JR, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 WILKIE DRIVE
 City CHARLESTON State WV Zip Code 25314-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412289
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DOUMAUX JR, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 WILKIE DRIVE
 City CHARLESTON State WV Zip Code 25314-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417913
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1273 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWLING, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13626 CANNADY CT
 City HOUSTON State TX Zip Code 77069-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411338
 Amount of Each Receipt this Period
 150.00
 Memo Item CONTRIBUTION

B. DOWNING, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 N 1ST AVE #9
 City STURGEON BAY State WI Zip Code 54235-2547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2016
Transaction ID : SA11A.364118
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

C. DOWNING, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12124 STIRRUP ROAD
 City RESTON State VA Zip Code 20191-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.353022
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 675.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1274 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNING, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12124 STIRRUP ROAD
 City RESTON State VA Zip Code 20191-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.353023
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. DOWNING, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 SOUTH VAN ROAD
 City HOLLY State MI Zip Code 48442-8717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372375
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DOWNING, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 SOUTH VAN ROAD
 City HOLLY State MI Zip Code 48442-8717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 18 / 2016**
Transaction ID : SA11A.399911
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1275 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNING, NEDRA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 S VAN RD
 City HOLLY State MI Zip Code 48442-8717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396756
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DOWNING, NEDRA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 S VAN RD
 City HOLLY State MI Zip Code 48442-8717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409790
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. DOWNS, DARIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8483 PORTLAND PLACE
 City MCLEAN State VA Zip Code 22102-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359375
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1276 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOWNS, DARIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8483 PORTLAND PLACE
 City MCLEAN State VA Zip Code 22102-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382359
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. DOWNS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 PEACHTREE BATTLE AVENUE
 City ATLANTA State GA Zip Code 30305-4063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388075
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DOWNS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 PEACHTREE BATTLE AVENUE
 City ATLANTA State GA Zip Code 30305-4063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414169
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1277 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOXEY, CLEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 627 NORTH SAINT MARYS LANE
 City MARIETTA State GA Zip Code 30064-1413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383304
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DOYKOS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 19039
 City SACRAMENTO State CA Zip Code 95819-0039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASE MED GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389404
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DOYLE, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14970 W MARK DR.
 City NEW BERLIN State WI Zip Code 53151-5740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362421
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1278 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOYLE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 548 N MISSION DRIVE
 City SAN GABRIEL State CA Zip Code 91775-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397017
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DOYLE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6608 GEORGE WASHINGTON WAY
 City NAPLES State FL Zip Code 34108-8240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362321
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DR.MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380854
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1279 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DR.MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD
 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.411702
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DR.MANNSFELD, SVEN-PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HILLWOOD ROAD
 48
 City MOBILE State AL Zip Code 36608-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418083
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DRABA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 FAIRFAX DRIVE
 UNIT 1200
 City ARLINGTON State VA Zip Code 22203-1686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US GOVERNMENT Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.370922
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1280 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRAIME, CECILE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 HUNTERS HOLLOW DRIVE SE
 City WARREN State OH Zip Code 44484-2367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361365
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. DRASNER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S FLAGLER DR.
 City WEST PALM BEACH State FL Zip Code 33401-6161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358525
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION

C. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354800
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10525.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1281 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DRESCHER, MARYRUTH, , ,
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363096
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DRESCHER, MARYRUTH, , ,
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363097
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DRESCHER, MARYRUTH, , ,
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363099
 Amount of Each Receipt this Period
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 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1282 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.375747
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt **09 / 04 / 2016**
Transaction ID : SA11A.389154
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400077
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1283 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404254
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. DRESCHER, MARYRUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 PAWNEE TRAIL
 City LOUISVILLE State KY Zip Code 40207-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415631
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. DRESSER, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3904 FRONTENAC PLACE
 City COLUMBIA State MO Zip Code 65203-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE NAVAL OFFICER Occupation (for Individual) RETIRED NAVAL OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.358850
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1284 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRESSER, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3904 FRONTENAC PLACE
 City COLUMBIA State MO Zip Code 65203-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE NAVAL OFFICER Occupation (for Individual) RETIRED NAVAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370587
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DRESSER, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3904 FRONTENAC PLACE
 City COLUMBIA State MO Zip Code 65203-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE NAVAL OFFICER Occupation (for Individual) RETIRED NAVAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370590
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DRESSER, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3904 FRONTENAC PLACE
 City COLUMBIA State MO Zip Code 65203-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE NAVAL OFFICER Occupation (for Individual) RETIRED NAVAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370592
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1285 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRESSER, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3904 FRONTENAC PLACE
 City COLUMBIA State MO Zip Code 65203-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE NAVAL OFFICER Occupation (for Individual) RETIRED NAVAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405516
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DREW, GEORGE, S., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 BERRIE RD.
 City AIKEN State SC Zip Code 29801-4803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLASTIC & RECONSTRUCTIVE SURG. CTR. Occupation (for Individual) MD.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407063
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DREW, GEORGE, S., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 BERRIE RD.
 City AIKEN State SC Zip Code 29801-4803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLASTIC & RECONSTRUCTIVE SURG. CTR. Occupation (for Individual) MD.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418121
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1286 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DREYER, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 IRONWOOD ROAD
 City SAN ANTONIO State TX Zip Code 78212-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.398884
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DRIESSEN, PAUL, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8760 COPELAND POND COURT
 City FAIRFAX State VA Zip Code 22031-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL-COMM PARTNERS Occupation (for Individual) ENERGY POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359708
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DRIESSEN, PAUL, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8760 COPELAND POND COURT
 City FAIRFAX State VA Zip Code 22031-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL-COMM PARTNERS Occupation (for Individual) ENERGY POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386894
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1287 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRIESSEN, PAUL, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8760 COPELAND POND COURT
 City FAIRFAX State VA Zip Code 22031-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL-COMM PARTNERS Occupation (for Individual) ENERGY POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419594
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DRINKWATER, GENEVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 495
 City COTTONWOOD State CA Zip Code 96022-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364825
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. DRINKWATER, GENEVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 495
 City COTTONWOOD State CA Zip Code 96022-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364826
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1288 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DRINKWATER, GENEVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 495

City COTTONWOOD	State CA	Zip Code 96022-0495
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364827

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. DRINKWATER, GENEVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 495

City COTTONWOOD	State CA	Zip Code 96022-0495
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368599

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

C. DRINKWATER, GENEVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 495

City COTTONWOOD	State CA	Zip Code 96022-0495
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368600

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1289 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRINKWATER, GENEVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 495
 City COTTONWOOD State CA Zip Code 96022-0495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368603
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. DRUMM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 FOX HOLLOW ROAD
 City VALATIE State NY Zip Code 12184-4602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.397318
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DRURY, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 HELMSDALE DRIVE
 City FOREST State VA Zip Code 24551-4838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350251
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	336.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1290 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRURY, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 HELMSDALE DRIVE
 City FOREST State VA Zip Code 24551-4838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422716
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. DRURY, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 HELMSDALE DRIVE
 City FOREST State VA Zip Code 24551-4838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422750
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. DUBOIS, TRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 152
 City LELAND State MS Zip Code 38756-0152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORLD CLASS ATHLETICS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.389342
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1291 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUBOSE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2990

City FORT WORTH	State TX	Zip Code 76113-2990
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLONIAL SAVINGS	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2016
Transaction ID : SA11A.365174

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. DUBOSE, SAMUEL, I., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 32 INTERLOCHEN DRIVE NE

City ATLANTA	State GA	Zip Code 30342-3702
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WHITE ELECTRICAL CONSTRUCTION	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2016
Transaction ID : SA11A.358558

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. DUCZAK, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4 CREEKSID LANE

City BARRINGTON	State IL	Zip Code 60010-9343
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016
Transaction ID : SA11A.357939

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1292 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUDLEY, ROBERT, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3365 W TELEGRAPH ROAD

City FILLMORE	State CA	Zip Code 93015-9651
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : SA11A.375119

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. DUDLEY, ROBERT, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3365 W TELEGRAPH ROAD

City FILLMORE	State CA	Zip Code 93015-9651
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.406495

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. DUENAS, SYLVIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 197 LEUCADENDRA DRIVE

City CORAL GABLES	State FL	Zip Code 33156-2370
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418887

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1293 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUFEEK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10875 SYMPHONY PARK DRIVE
 City NORTH BETHESDA State MD Zip Code 20852-3486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) LABOR RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361941
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUFEEK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10875 SYMPHONY PARK DRIVE
 City NORTH BETHESDA State MD Zip Code 20852-3486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USPS Occupation (for Individual) LABOR RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380351
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUFFEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 ASTOR AVENUE
 City NORWOOD State MA Zip Code 02062-5016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REGAL PRESS, INC. Occupation (for Individual) PRINTING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346531
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1294 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUFFEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 ASTOR AVENUE
 City NORWOOD State MA Zip Code 02062-5016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REGAL PRESS, INC. Occupation (for Individual) PRINTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365125
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUFFEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 ASTOR AVENUE
 City NORWOOD State MA Zip Code 02062-5016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REGAL PRESS, INC. Occupation (for Individual) PRINTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393674
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUFFY, WILLIAM, T., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20637 LEONARD ROAD
 City SARATOGA State CA Zip Code 95070-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369391
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1295 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUGGAN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23725 VIA ROBLE
 City COTO DE CAZA State CA Zip Code 92679-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FIRST NATIONAL CAPITAL PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348459
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. DUGGAN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23725 VIA ROBLE
 City COTO DE CAZA State CA Zip Code 92679-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FIRST NATIONAL CAPITAL PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384047
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. DUGGAN, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23725 VIA ROBLE
 City COTO DE CAZA State CA Zip Code 92679-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FIRST NATIONAL CAPITAL PRESIDENT/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412096
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1296 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUGGAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 PIGEON HILL ROAD
 City WESTON State MA Zip Code 02493-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MINTZ LEVIN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358514
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DUKE, MEG, SHIELDS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4450 S CLARKSON ST
 City ENGLEWOOD State CO Zip Code 80113-5905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.360812
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. DUKETT, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 1 BOX 98A
 City ROODHOUSE State IL Zip Code 62082-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINCHESTER CUSD #1 Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388572
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1297 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNAGAN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 HOOPER WAY
 City ANCHORAGE State AK Zip Code 99515-2340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359909
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNAGAN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 HOOPER WAY
 City ANCHORAGE State AK Zip Code 99515-2340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384759
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUNAGAN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 HOOPER WAY
 City ANCHORAGE State AK Zip Code 99515-2340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419559
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1298 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNATHAN, JAMES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18745 HUMMINGBIRD DRIVE
 City PENN VALLEY State CA Zip Code 95946-9692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.343888
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNATHAN, JAMES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18745 HUMMINGBIRD DRIVE
 City PENN VALLEY State CA Zip Code 95946-9692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381189
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DUNCAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 CASTLEGATE WYND
 City LEXINGTON State KY Zip Code 40502-7701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348610
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1299 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNCAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 CASTLEGATE WYND
 City LEXINGTON State KY Zip Code 40502-7701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348619
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DUNCAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 CASTLEGATE WYND
 City LEXINGTON State KY Zip Code 40502-7701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355242
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. DUNCAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 CASTLEGATE WYND
 City LEXINGTON State KY Zip Code 40502-7701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355245
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1300 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNCAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 CASTLEGATE WYND

City LEXINGTON	State KY	Zip Code 40502-7701
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368835

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. DUNCAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 CASTLEGATE WYND

City LEXINGTON	State KY	Zip Code 40502-7701
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392023

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. DUNCAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 CASTLEGATE WYND

City LEXINGTON	State KY	Zip Code 40502-7701
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400089

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1301 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNCAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 CASTLEGATE WYND
 City LEXINGTON State KY Zip Code 40502-7701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.409933
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DUNCAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 OSPREY VILLAGE DRIVE
 City AMELIA ISLAND State FL Zip Code 32034-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362338
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. DUNCAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 OSPREY VILLAGE DRIVE
 City AMELIA ISLAND State FL Zip Code 32034-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 04 / 2016**
Transaction ID : SA11A.389181
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1302 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNCAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 OSPREY VILLAGE DRIVE
 City AMELIA ISLAND State FL Zip Code 32034-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415059
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNKUM, ELLIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ST JULIANS LANE
 City RICHMOND State VA Zip Code 23238-5910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365229
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DUNKUM, ELLIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ST JULIANS LANE
 City RICHMOND State VA Zip Code 23238-5910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389775
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1303 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNKUM, ELLIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ST JULIANS LANE
 City RICHMOND State VA Zip Code 23238-5910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406565
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNLAP-POTTS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 MILLCREEK LANE
 City COLUMBUS State OH Zip Code 43220-4950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380227
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DUNLOP, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 ELM STREET
 City SUMMIT State NJ Zip Code 07901-3435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395980
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1304 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : SA11A.345794
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION

B. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357164
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359332
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1305 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 08 / 03 / 2016
Transaction ID : SA11A.362587
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382125
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : SA11A.382817
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1306 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396938
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401343
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. DUNLOP, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7550 N 16TH ST
 APT 6119
 City PHOENIX State AZ Zip Code 85020-4618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408945
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1307 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNN, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1782 TERRY LYNN LANE
 City SANTA ANA State CA Zip Code 92705-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 02 / 2016**
Transaction ID : SA11A.360079
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DUNN, ERIC, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11691 PETTIT STREET
 City MORENO VALLEY State CA Zip Code 92555-5304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALESHIRE & WYNDER LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.348004
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DUNN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5065 CLARK STATE ROAD
 City COLUMBUS State OH Zip Code 43230-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLASKOUIE INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.360911
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1308 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNN, JOESPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 116 FAIRVIEW AVENUE N UNIT 404

City SEATTLE	State WA	Zip Code 98109-5350
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 02 / 2016

Transaction ID : SA11A.389081

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. DUNN, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 W ELM STREET SUITE 2314
SUITE 2314

City CONSHOCKEN	State PA	Zip Code 19428-1832
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) WRITER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2016

Transaction ID : SA11A.361430

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. DUNN, WILLIAM, H., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 53 COVENTRY CT

City PRAIRIE VILLAGE	State KS	Zip Code 66208-5228
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.383534

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1309 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNOYER, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 E 12TH AVENUE #22
 City DENVER State CO Zip Code 80206-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383312
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNOYER, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 E 12TH AVENUE #22
 City DENVER State CO Zip Code 80206-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417058
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354482
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1310 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384568
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384631
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404767
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1311 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404775
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DUNSTAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4319 BRONSON BLVD
 City KALAMAZOO State MI Zip Code 49008-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415171
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. DUPAPE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 PARADISE CV.
 City SHADY SHORES State TX Zip Code 76208-5131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373384
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1312 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUPLESSIE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 397

City ATHOL	State MA	Zip Code 01331-0397
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MSC INDUSTRIAL	Occupation (for Individual) SALES MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : SA11A.353545

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

B. DUPLESSIE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 397

City ATHOL	State MA	Zip Code 01331-0397
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MSC INDUSTRIAL	Occupation (for Individual) SALES MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11A.375678

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

C. DUPLESSIE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 397

City ATHOL	State MA	Zip Code 01331-0397
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MSC INDUSTRIAL	Occupation (for Individual) SALES MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.404172

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1313 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUPONT, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12079 S MAGPIE PT

City FLORAL CITY State FL Zip Code 34436-4247

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.403367

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. DURAND, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 SUMMER SKY CIRCLE

City RANCHO MIRAGE State CA Zip Code 92270-1979

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016

Transaction ID : SA11A.378782

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. DURFEE, ALLISON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 ALLINDALE WAY

City DEDHAM State MA Zip Code 02026-4201

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
309.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11A.382102

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1314 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DURFEE, ALLISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 ALLINDALE WAY
 City DEDHAM State MA Zip Code 02026-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404151
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DURFEE, ALLISON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 ALLINDALE WAY
 City DEDHAM State MA Zip Code 02026-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419658
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DURHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2390 INVERWOOD DR.
 City ACWORTH State GA Zip Code 30101-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365094
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1315 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DURHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2390 INVERWOOD DR.
 City ACWORTH State GA Zip Code 30101-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387261
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. DURHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2390 INVERWOOD DR.
 City ACWORTH State GA Zip Code 30101-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403602
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DURHAM, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2390 INVERWOOD DR.
 City ACWORTH State GA Zip Code 30101-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418266
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1316 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DURST, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5372
 City **BOISE** State ID Zip Code **83705-0372**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365435
 Amount of Each Receipt this Period **1000.00**
 Memo Item CONTRIBUTION

B. DYDEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22105 IRON KNOLL DR.
 City **KINGWOOD** State **TX** Zip Code **77339-1445**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350415
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

C. DYDEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22105 IRON KNOLL DR.
 City **KINGWOOD** State **TX** Zip Code **77339-1445**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356330
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1317 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DYDEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22105 IRON KNOLL DR.
 City KINGWOOD State TX Zip Code 77339-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383081
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. DYDEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22105 IRON KNOLL DR.
 City KINGWOOD State TX Zip Code 77339-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411324
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. DYDEK, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22105 IRON KNOLL DR.
 City KINGWOOD State TX Zip Code 77339-1445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419040
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1318 OF 5722
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DYKE, RICHARD, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2016	
Mailing Address 999 ROOSEVELT TRAIL			Transaction ID : SA11A.349540	
City WINDHAM	State ME	Zip Code 04062-5649	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) WINDHAM WEAPONRY		Occupation (for Individual) CHM & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DYKE, RICHARD, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2016	
Mailing Address 999 ROOSEVELT TRAIL			Transaction ID : SA11A.401361	
City WINDHAM	State ME	Zip Code 04062-5649	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) WINDHAM WEAPONRY		Occupation (for Individual) CHM & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DYKHOFF, DAVID, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2016	
Mailing Address 4425 CATLIN CIRCLE UNIT B			Transaction ID : SA11A.380599	
City CARPINTERIA	State CA	Zip Code 93013-1656	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) CSA ASSOCIATES, LLC		Occupation (for Individual) CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 550.00		

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1319 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DYKHOFF, DAVID, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016
Mailing Address 4425 CATLIN CIRCLE UNIT B		Transaction ID : SA11A.384335
City CARPINTERIA	State CA	Zip Code 93013-1656
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) CSA ASSOCIATES, LLC	Occupation (for Individual) CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DYKHOFF, DAVID, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 4425 CATLIN CIRCLE UNIT B		Transaction ID : SA11A.403573
City CARPINTERIA	State CA	Zip Code 93013-1656
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) CSA ASSOCIATES, LLC	Occupation (for Individual) CONSULTANT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DYKHOUSE, DEBORAH, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 270 FARMSTEAD HILL RD		Transaction ID : SA11A.421998
City FAIRFIELD	State CT	Zip Code 06824-7119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1320 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EADS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1839 KIRBY DR
 City HOUSTON State TX Zip Code 77019-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA RESOURCES LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400513
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. EARHART, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3326 PINE GLEN COURT
 City PHOENIXVILLE State PA Zip Code 19460-4865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356571
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EARHART, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3326 PINE GLEN COURT
 City PHOENIXVILLE State PA Zip Code 19460-4865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392620
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1321 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EARLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1323 AVENUE D #1477
 City SNOHOMISH State WA Zip Code 98291-9070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RJE REAL ESTATE LLC Occupation (for Individual) OWNER MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387712
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. EARLY, VIRGIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1659
 City SMITHFIELD State NC Zip Code 27577-1659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.362017
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. EARLY, VIRGIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1659
 City SMITHFIELD State NC Zip Code 27577-1659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2016
Transaction ID : SA11A.389237
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1322 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EARLY, VIRGIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1659
 City SMITHFIELD State NC Zip Code 27577-1659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409816
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. EARLY, VIRGIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1659
 City SMITHFIELD State NC Zip Code 27577-1659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409818
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. EARNSHAW, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461
 City EDGEWOOD State NM Zip Code 87015-0461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF NEW MEXICO Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385936
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1323 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EARNSHAW, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461
 City EDGEWOOD State NM Zip Code 87015-0461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF NEW MEXICO Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389412
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. EARNSHAW, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461
 City EDGEWOOD State NM Zip Code 87015-0461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF NEW MEXICO Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390880
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EARNSHAW, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461
 City EDGEWOOD State NM Zip Code 87015-0461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF NEW MEXICO Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393049
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1324 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EARNSHAW, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 461

City EDGEWOOD	State NM	Zip Code 87015-0461
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF NEW MEXICO	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.423130

Amount of Each Receipt this Period
45.00

Memo Item
CONTRIBUTION

B. EASTERBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET

City NEWPORT BEACH	State CA	Zip Code 92661-1418
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BALBOA BRANDS, INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1005.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349876

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. EASTERBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET

City NEWPORT BEACH	State CA	Zip Code 92661-1418
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BALBOA BRANDS, INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1005.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349877

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	245.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1325 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTERBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET
 City NEWPORT BEACH State CA Zip Code 92661-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALBOA BRANDS, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374920
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. EASTERBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET
 City NEWPORT BEACH State CA Zip Code 92661-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALBOA BRANDS, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376168
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. EASTERBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET
 City NEWPORT BEACH State CA Zip Code 92661-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALBOA BRANDS, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399734
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1326 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTERBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 G STREET
 City NEWPORT BEACH State CA Zip Code 92661-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALBOA BRANDS, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400838
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358969
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362351
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1327 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383713
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387865
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EASTLACK, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2514 N. ROYER ST.
 City COLORADO SPRINGS State CO Zip Code 80907-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST LUTHERAN CHURCH Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 04 / 2016**
Transaction ID : SA11A.389157
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1328 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTLACK, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2514 N. ROYER ST.

City COLORADO SPRINGS	State CO	Zip Code 80907-7054
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST LUTHERAN CHURCH	Occupation (for Individual) RECEPTIONIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415115

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. EASTON, RANDALL, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 FIRST STREET SE SUITE 420

City CEDAR RAPIDS	State IA	Zip Code 52401-2032
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US WATER COMPANY	Occupation (for Individual) US WATER COMPANY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2016

Transaction ID : SA11A.354679

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. EASTON, RANDALL, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 FIRST STREET SE SUITE 420

City CEDAR RAPIDS	State IA	Zip Code 52401-2032
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US WATER COMPANY	Occupation (for Individual) US WATER COMPANY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.377434

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1329 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTON, RANDALL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 FIRST STREET SE SUITE 420
 City CEDAR RAPIDS State IA Zip Code 52401-2032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US WATER COMPANY Occupation (for Individual) US WATER COMPANY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1610.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383544
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. EASTON, RANDALL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 FIRST STREET SE SUITE 420
 City CEDAR RAPIDS State IA Zip Code 52401-2032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US WATER COMPANY Occupation (for Individual) US WATER COMPANY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1610.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405126
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EATON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 SANTA MARIA COURT
 City ODESSA State TX Zip Code 79765-8515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASTER CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1330 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EATON, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 SANTA MARIA COURT

City ODESSA	State TX	Zip Code 79765-8515
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MASTER CORPORATION	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407935

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. EAVES, REUBEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 975 MEMORIAL DRIVE
APT 804

City CAMBRIDGE	State MA	Zip Code 02138-5753
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C.T.S. ADVISORS	Occupation (for Individual) FINANCIAL MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389794

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. EAVES, REUBEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 975 MEMORIAL DRIVE
APT 804

City CAMBRIDGE	State MA	Zip Code 02138-5753
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C.T.S. ADVISORS	Occupation (for Individual) FINANCIAL MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417343

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1331 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERLE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 MEOQUI COURT NW
 City ALBUQUERQUE State NM Zip Code 87107-5613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353330
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 07 / 09 / 2016
Transaction ID : SA11A.346701
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352387
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1332 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362465
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363886
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375900
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1333 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERSOLE, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 LAURIE AVENUE

City HUMMELSTOWN	State PA	Zip Code 17036-9720
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
567.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.382856

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. EBERSOLE, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 LAURIE AVENUE

City HUMMELSTOWN	State PA	Zip Code 17036-9720
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
567.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.382857

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. EBERSOLE, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 LAURIE AVENUE

City HUMMELSTOWN	State PA	Zip Code 17036-9720
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
567.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400093

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1334 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401487
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415026
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. EBERSOLE, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 LAURIE AVENUE
 City HUMMELSTOWN State PA Zip Code 17036-9720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415027
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1335 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EBERSOLE, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 LAURIE AVENUE

City HUMMELSTOWN	State PA	Zip Code 17036-9720
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
567.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415033

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. EBERSOLE, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 LAURIE AVENUE

City HUMMELSTOWN	State PA	Zip Code 17036-9720
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
567.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415034

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. EBSWORTH, BARNEY, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4053 HUNTS POINT RD

City BELLEVUE	State WA	Zip Code 98004-1109
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367950

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1336 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECHELBARGER, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23426 WOODWAY PARK RD

City WOODWAY	State WA	Zip Code 98020-6105
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 04 / 2016
Transaction ID : SA11A.362356

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ECHELBARGER, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23426 WOODWAY PARK RD

City WOODWAY	State WA	Zip Code 98020-6105
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.374376

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. ECHOLS, MONT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 7

City FORT SMITH	State AR	Zip Code 72902-0007
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST NATIONAL BANK	Occupation (for Individual) BANKER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 02 / 2016
Transaction ID : SA11A.389069

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1337 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECKARD, MARYSUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6465 LIBERTY ROAD**

City SOLON	State OH	Zip Code 44139-3223
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 31 / 2016

Transaction ID : SA11A.385700

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ECKARD, MARYSUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6465 LIBERTY ROAD**

City SOLON	State OH	Zip Code 44139-3223
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.423071

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ECKARD, MARYSUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6465 LIBERTY ROAD**

City SOLON	State OH	Zip Code 44139-3223
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.423083

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1338 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECKARD, MARYSUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **6465 LIBERTY ROAD**
 City **SOLON** State **OH** Zip Code **44139-3223**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.423086
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. ECKERT, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **725 ALTAVISTA DR.**
 City **VISTA** State **CA** Zip Code **92084-5511**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374213
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

C. ECKERT, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **725 ALTAVISTA DR.**
 City **VISTA** State **CA** Zip Code **92084-5511**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397902
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1339 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECKERT, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 ALTAVISTA DR.
 City VISTA State CA Zip Code 92084-5511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397904
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ECKLES, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1241 W. CASAD AVE.
 City WEST COVINA State CA Zip Code 91790-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366814
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ECKLES, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1241 W. CASAD AVE.
 City WEST COVINA State CA Zip Code 91790-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366815
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1340 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECKLES, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1241 W. CASAD AVE.
 City WEST COVINA State CA Zip Code 91790-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 13 / 2016
Transaction ID : SA11A.366816
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ECKLES, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1241 W. CASAD AVE.
 City WEST COVINA State CA Zip Code 91790-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 13 / 2016
Transaction ID : SA11A.366817
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ECKLES, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1241 W. CASAD AVE.
 City WEST COVINA State CA Zip Code 91790-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.370174
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1341 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ECKSTINE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 STATE HIGHWAY 66
 City LONGMONT State CO Zip Code 80504-9605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362343
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EDBAUER, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 DELAWARE AVE UNIT 1609
 City BUFFALO State NY Zip Code 14202-2112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385227
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. EDGERLY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 HIGHLAND STREET
 City CAMBRIDGE State MA Zip Code 02138-2210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404145
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1342 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDGERLY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 HIGHLAND STREET

City CAMBRIDGE	State MA	Zip Code 02138-2210
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.410773

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. EDNER, PATRICIA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 597 SE BEAVER CREEK LANE

City TROUTDALE	State OR	Zip Code 97060-3216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.349118

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. EDNER, PATRICIA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 597 SE BEAVER CREEK LANE

City TROUTDALE	State OR	Zip Code 97060-3216
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SA11A.370769

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1343 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDNER, PATRICIA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 597 SE BEAVER CREEK LANE
 City TROUTDALE State OR Zip Code 97060-3216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400688
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EDNER, PATRICIA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 597 SE BEAVER CREEK LANE
 City TROUTDALE State OR Zip Code 97060-3216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413731
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EDSALL JR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 N SANS SOUCI AVENUE
 City DELAND State FL Zip Code 32720-3435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352667
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1344 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDSALL JR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 N SANS SOUCI AVENUE
 City DELAND State FL Zip Code 32720-3435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398618
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EDSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 SHORE DR
 City CAMANO ISLAND State WA Zip Code 98282-8610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415925
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. EDWARDS, CLEMENTINA, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 CHURCH STREET
 City CHARLESTON State SC Zip Code 29401-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361419
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1345 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 CANAL STREET
 City IRVING State TX Zip Code 75063-6485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369971
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EDWARDS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 MOUNTAIN VIEW DR
 City CROSSVILLE State TN Zip Code 38558-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394257
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. EDWARDS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 MOUNTAIN VIEW DR
 City CROSSVILLE State TN Zip Code 38558-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.414052
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1346 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 MOUNTAIN VIEW DR
 City CROSSVILLE State TN Zip Code 38558-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415315
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EDWARDS, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2814 CARLISLE DR.
 City NEW WINDSOR State MD Zip Code 21776-9709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349280
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EDWARDS, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2814 CARLISLE DR.
 City NEW WINDSOR State MD Zip Code 21776-9709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349666
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1347 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2814 CARLISLE DR.
 City NEW WINDSOR State MD Zip Code 21776-9709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374705
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. EDWARDS, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2814 CARLISLE DR.
 City NEW WINDSOR State MD Zip Code 21776-9709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399410
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. EDWARDS, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2814 CARLISLE DR.
 City NEW WINDSOR State MD Zip Code 21776-9709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399738
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1348 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 CARPENTERS WAY, APT F320
 City LAKELAND State FL Zip Code 33809-3972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391614
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. EDWARDS, W. JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13038 STATE HIGHWAY 99E
 City RED BLUFF State CA Zip Code 96080-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361130
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. EEK, ELISABETH, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 VIKING DRIVE
 City HERNDON State VA Zip Code 20171-2421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRINCE WILLIAM CO SCHOOLS Occupation (for Individual) SUBSTITUTE TECAHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.360185
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1349 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EEK, ELISABETH, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 VIKING DRIVE
 City HERNDON State VA Zip Code 20171-2421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRINCE WILLIAM CO SCHOOLS Occupation (for Individual) SUBSTITUTE TECAHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396776
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EEK, ELISABETH, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 VIKING DRIVE
 City HERNDON State VA Zip Code 20171-2421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRINCE WILLIAM CO SCHOOLS Occupation (for Individual) SUBSTITUTE TECAHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396778
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EEK, ELISABETH, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 VIKING DRIVE
 City HERNDON State VA Zip Code 20171-2421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRINCE WILLIAM CO SCHOOLS Occupation (for Individual) SUBSTITUTE TECAHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396783
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1350 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EENIGENBURG, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10049 PRAIRIE KNOLL CT
 City SAINT JOHN State IN Zip Code 46373-8752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368063
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. EENIGENBURG, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10049 PRAIRIE KNOLL CT
 City SAINT JOHN State IN Zip Code 46373-8752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380406
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. EENIGENBURG, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10049 PRAIRIE KNOLL CT
 City SAINT JOHN State IN Zip Code 46373-8752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394113
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1351 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EGAN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 MAYFIELD ROAD
 City WAYZATA State MN Zip Code 55391-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349217
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EGAN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 MAYFIELD ROAD
 City WAYZATA State MN Zip Code 55391-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EGAN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BURGESS RD
 City WORCESTER State MA Zip Code 01609-1643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLEHER & SADOWSKY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.421208
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1352 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EGGEMEYER, JOHN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 24156
 City RANCHO SANTA FE State CA Zip Code 92067-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360081
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. EHRET, JEFFREY, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 INDIGO SPRINGS STREET
 City HENDERSON State NV Zip Code 89014-0504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 THE PENTA BUILDING GROUP MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.351871
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EHRlich, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9710 BEMAN WOODS WAY
 City POTOMAC State MD Zip Code 20854-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401191
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1353 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EHRlich, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 JOHNSTON RD.
 City MC DONALD State TN Zip Code 37353-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS LEADERSHIP DEVELOPEI
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352408
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EHRlich, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 JOHNSTON RD.
 City MC DONALD State TN Zip Code 37353-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS LEADERSHIP DEVELOPE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375895
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EHRlich, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 JOHNSTON RD.
 City MC DONALD State TN Zip Code 37353-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS LEADERSHIP DEVELOPEF
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401508
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1354 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EHRlich, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 JOHNSTON RD.
 City MC DONALD State TN Zip Code 37353-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS LEADERSHIP DEVELOPEI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420073
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EHRlich, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 JOHNSTON RD.
 City MC DONALD State TN Zip Code 37353-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS LEADERSHIP DEVELOPE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420088
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EHRlich, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 JOHNSTON RD.
 City MC DONALD State TN Zip Code 37353-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS LEADERSHIP DEVELOPEF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420089
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1355 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 LIZARD HEAD DRIVE
 City DURANGO State CO Zip Code 81301-8821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365423
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EICHENBERGER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 CENTRAL PARK W APT 21J
 City NEW YORK State NY Zip Code 10023-7231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J P MORGAN Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364266
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.345798
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1356 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347334
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350573
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352649
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1357 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2016

Transaction ID : SA11A.354583

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359204

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365812

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1358 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON State GA Zip Code 30115-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.373037

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON State GA Zip Code 30115-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.373038

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON State GA Zip Code 30115-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016

Transaction ID : SA11A.376237

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1359 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376239
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379079
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380096
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1360 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382188
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382193
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385764
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1361 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393698
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397803
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397806
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1362 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON State GA Zip Code 30115-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11A.400935

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON State GA Zip Code 30115-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11A.400936

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON State GA Zip Code 30115-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11A.405586

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1363 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2016

Transaction ID : SA11A.408977

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2016

Transaction ID : SA11A.416468

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EICHENBAUM, SUMIE, Y., ,

Mailing Address 5060 GOVERNORS WALK DR

City CANTON	State GA	Zip Code 30115-2403
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2016

Transaction ID : SA11A.416477

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1364 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416478
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418705
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418706
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1365 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHLER, ERIC, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 JAFFREY ROAD
 City MALVERN State PA Zip Code 19355-3417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358624
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. EIDSON, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 357 IVY CIRCLE
 City ELKIN State NC Zip Code 28621-3030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G&B ENERGY Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.406248
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EIDSVOLD, ROBERT, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 PONDWOOD DRIVE
 City MINNEAPOLIS State MN Zip Code 55439-2764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 07 / 2016**
Transaction ID : SA11A.345788
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1366 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EIDSVOLD, ROBERT, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 PONDWOOD DRIVE
 City MINNEAPOLIS State MN Zip Code 55439-2764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.346200
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. EIDSVOLD, ROBERT, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 PONDWOOD DRIVE
 City MINNEAPOLIS State MN Zip Code 55439-2764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.355820
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. EISELE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4128 STOWE RUN LANE
 City JACKSONVILLE State FL Zip Code 32225-1622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370155
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1367 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EISELE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4128 STOWE RUN LANE
 City JACKSONVILLE State FL Zip Code 32225-1622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407511
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EKLUND, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 VASQUEZ TRAIL
 City CARMEL State CA Zip Code 93923-7731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380412
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EKLUND, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 VASQUEZ TRAIL
 City CARMEL State CA Zip Code 93923-7731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380415
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1368 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EKLUND, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 VASQUEZ TRAIL
 City CARMEL State CA Zip Code 93923-7731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386473
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EKLUND, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 VASQUEZ TRAIL
 City CARMEL State CA Zip Code 93923-7731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408443
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ELARDI, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3411 LAS VEGAS BLVD.
 City LAS VEGAS State NV Zip Code 89109-8955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASINO ROYALE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401295
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1369 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELBERT, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 SKI WAY #311
 City INCLINE VILLAGE State NV Zip Code 89451-9203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370809
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ELDEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 N. LAKEVIEW 11S
 City CHICAGO State IL Zip Code 60614-2877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379778
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. ELDEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 N. LAKEVIEW 11S
 City CHICAGO State IL Zip Code 60614-2877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408650
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1370 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELDER, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16895 MEADOW LANE
 City BELTON State MO Zip Code 64012-4112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356176
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. ELDER, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16895 MEADOW LANE
 City BELTON State MO Zip Code 64012-4112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.394611
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ELEIOTT, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15711 KNAUFF RANCH CT
 City CYPRESS State TX Zip Code 77429-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TKE ENGINEERING & DESIGN, INC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352397
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1371 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELEIOTT, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15711 KNAUFF RANCH CT
 City CYPRESS State TX Zip Code 77429-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TKE ENGINEERING & DESIGN, INC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375966
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ELEIOTT, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15711 KNAUFF RANCH CT
 City CYPRESS State TX Zip Code 77429-6129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TKE ENGINEERING & DESIGN, INC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401403
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353835
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1372 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388287
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388289
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ELIASSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1205 20TH ST SO
 City VIRGINIA State MN Zip Code 55792-3724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419283
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1373 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLESTAD, BOYD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30508 SANTA LUNA DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-6318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347354
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. ELLESTAD, BOYD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30508 SANTA LUNA DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-6318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347355
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. ELLESTAD, BOYD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30508 SANTA LUNA DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-6318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347356
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1374 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLESTAD, BOYD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30508 SANTA LUNA DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-6318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363823
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

B. ELLESTAD, BOYD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30508 SANTA LUNA DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-6318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372251
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ELLESTAD, BOYD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30508 SANTA LUNA DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-6318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392144
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1375 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 BENT OAK DR.
 City SHAVANO PARK State TX Zip Code 78231-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368573
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 BENT OAK DR.
 City SHAVANO PARK State TX Zip Code 78231-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389263
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 BENT OAK DR.
 City SHAVANO PARK State TX Zip Code 78231-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390269
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1376 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 104 BENT OAK DR.

City SHAVANO PARK State TX Zip Code 78231-1503

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.390270

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 104 BENT OAK DR.

City SHAVANO PARK State TX Zip Code 78231-1503

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016

Transaction ID : SA11A.392063

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 104 BENT OAK DR.

City SHAVANO PARK State TX Zip Code 78231-1503

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.394155

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1377 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 104 BENT OAK DR.

City SHAVANO PARK	State TX	Zip Code 78231-1503
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402803

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 104 BENT OAK DR.

City SHAVANO PARK	State TX	Zip Code 78231-1503
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402823

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD, , ,

Mailing Address 104 BENT OAK DR.

City SHAVANO PARK	State TX	Zip Code 78231-1503
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410758

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1378 OF 5722
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	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIOTT, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 BENT OAK DR.
 City SHAVANO PARK State TX Zip Code 78231-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417614
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELLIOTT, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 MOUNTAIN VIEW AVENUE
 City DANVILLE State VA Zip Code 24541-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.361209
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELLIOTT, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 MOUNTAIN VIEW AVENUE
 City DANVILLE State VA Zip Code 24541-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392422
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1379 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIOTT, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 MOUNTAIN VIEW AVENUE
 City DANVILLE State VA Zip Code 24541-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394872
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ELLIOTT, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 MOUNTAIN VIEW AVENUE
 City DANVILLE State VA Zip Code 24541-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401772
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ELLIOTT, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 MOUNTAIN VIEW AVENUE
 City DANVILLE State VA Zip Code 24541-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414552
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1380 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIOTT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1929 10TH AVENUE E
 City SEATTLE State WA Zip Code 98102-4252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377766
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ELLIS, ALVIN, A., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 ELLIS LANE
 City RED LODGE State MT Zip Code 59068-9647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394853
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ELLISS, CECELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1486 PRAIRIE HIGH RD
 City CASTLE ROCK State CO Zip Code 80109-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372116
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1381 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLISS, CECELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1486 PRAIRIE HIGH RD
 City CASTLE ROCK State CO Zip Code 80109-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391075
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ELLISS, CECELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1486 PRAIRIE HIGH RD
 City CASTLE ROCK State CO Zip Code 80109-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405697
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ELLISS, CECELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1486 PRAIRIE HIGH RD
 City CASTLE ROCK State CO Zip Code 80109-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405700
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1382 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLISS, CECELIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1486 PRAIRIE HIGH RD
City CASTLE ROCK State CO Zip Code 80109-8008
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405715
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. ELLIS, LUCILE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1370 TIPPETTEVILLE ROAD
City VIENNA State GA Zip Code 31092-6212
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377005
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ELLIS, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1403 COLA DRIVE
City MCLEAN State VA Zip Code 22101-3103
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RAYMOND ELLIS CONSULTING Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396224
Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1383 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIS, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1403 COLA DRIVE
 City MCLEAN State VA Zip Code 22101-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYMOND ELLIS CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410203
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. ELLIS, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1403 COLA DRIVE
 City MCLEAN State VA Zip Code 22101-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYMOND ELLIS CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422420
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. ELLIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33520 SILVER OAK DR.
 City AVON State OH Zip Code 44011-3747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LA ROCA GROUP, LLC Occupation (for Individual) LA ROCA GROUP, LLC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407570
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1384 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELLIS, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 218
 City HURDLE MILLS State NC Zip Code 27541-0218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROY K ELLIS CONSULTING LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400286
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ELMER, IVAN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6251 OLD DOMINION DRIVE APT 304
 City MCLEAN State VA Zip Code 22101-4807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 697.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353544
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELMER, IVAN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6251 OLD DOMINION DRIVE APT 304
 City MCLEAN State VA Zip Code 22101-4807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 697.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372372
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1385 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELMER, IVAN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6251 OLD DOMINION DRIVE
 APT 304
 City MCLEAN State VA Zip Code 22101-4807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 697.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372373
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELMER, IVAN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6251 OLD DOMINION DRIVE
 APT 304
 City MCLEAN State VA Zip Code 22101-4807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 697.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376334
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELSEY, JOHN, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 CHEYENNE TRAIL
 City BILLINGS State MT Zip Code 59106-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396328
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1386 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELTON, MARYLATA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5068 CALVIN AVENUE
 City TARZANA State CA Zip Code 91356-4442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 MARQUAND MUSIC INC MUSIC PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376059
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ELTON, MARYLATA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5068 CALVIN AVENUE
 City TARZANA State CA Zip Code 91356-4442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 MARQUAND MUSIC INC MUSIC PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403448
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ELVERUM, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38220 BEAR CANYON DR
 City MURRIETA State CA Zip Code 92562-3037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : SA11A.346053
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1387 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELVERUM, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38220 BEAR CANYON DR
 City MURRIETA State CA Zip Code 92562-3037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.348325
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ELVERUM, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38220 BEAR CANYON DR
 City MURRIETA State CA Zip Code 92562-3037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.385091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ELVERUM, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38220 BEAR CANYON DR
 City MURRIETA State CA Zip Code 92562-3037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.406237
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1388 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELWELL, DENNIS, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 187
 City AKENY State IA Zip Code 50021-0187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENNY ELWELL CO. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 27500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379115
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. ELWELL, DENNIS, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 187
 City AKENY State IA Zip Code 50021-0187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENNY ELWELL CO. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 27500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391347
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. ELWOOD, DAVID, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3422 GROVE PLACE
 City COLUMBUS State IN Zip Code 47203-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELWOOD STAFFING Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369242
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	28500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1389 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ELWOOD, DAVID, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3422 GROVE PLACE

City COLUMBUS	State IN	Zip Code 47203-1601
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELWOOD STAFFING	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11A.406991

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. ELY, CALVIN, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1788 AVENIDA VISTA LABERA

City OCEANSIDE	State CA	Zip Code 92056-6515
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SA11A.366531

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. EMERY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2320 NORTH 52ND STREET #217

City PHOENIX	State AZ	Zip Code 85008-2654
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

Transaction ID : SA11A.352590

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1390 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMERY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 NORTH 52ND STREET #217
 City PHOENIX State AZ Zip Code 85008-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364754
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. EMERY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 NORTH 52ND STREET #217
 City PHOENIX State AZ Zip Code 85008-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392024
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. EMERY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 NORTH 52ND STREET #217
 City PHOENIX State AZ Zip Code 85008-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413961
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1391 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EMERY, JAMES, , ,

Mailing Address **2320 NORTH 52ND STREET #217**

City PHOENIX	State AZ	Zip Code 85008-2654
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416890

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EMERY, PHILIP, H., , JR.

Mailing Address **PO BOX 474**

City OAKLAND	State MD	Zip Code 21550-4474
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.417101

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EMILIO, RITA, R., ,

Mailing Address **5 PHINN AVENUE**

City BINGHAMTON	State NY	Zip Code 13903-2031
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 22 / 2016

Transaction ID : SA11A.351854

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1392 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMILIO, RITA, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 PHINN AVENUE

City BINGHAMTON	State NY	Zip Code 13903-2031
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417768

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. EMILIO, RITA, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 PHINN AVENUE

City BINGHAMTON	State NY	Zip Code 13903-2031
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417773

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. EMMERSON, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 496028

City REDDING	State CA	Zip Code 96049-6028
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIERRA PACIFIC INDUSTRIES	Occupation (for Individual) LUMBERMAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
75000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379109

Amount of Each Receipt this Period
75000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1393 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMMERSON, MARK, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 496028

City REDDING	State CA	Zip Code 96049-6028
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIERRA PACIFIC INDUSTRIES	Occupation (for Individual) CFO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.367925

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. ENDERLE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 508 W, BRANNON RD

City NICHOLASVILLE	State KY	Zip Code 40356-8075
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENDERLE BESTEN DIERUF	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2016

Transaction ID : SA11A.355746

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ENDERLE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 508 W, BRANNON RD

City NICHOLASVILLE	State KY	Zip Code 40356-8075
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENDERLE BESTEN DIERUF	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2016

Transaction ID : SA11A.380785

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1394 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENDERLE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 W, BRANNON RD
 City NICHOLASVILLE State KY Zip Code 40356-8075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENDERLE BESTEN DIERUF Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408024
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360218
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360219
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1395 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403744
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403749
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410752
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1396 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414192
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414194
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420406
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1397 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422696
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12116 DOUBLE TREE LANE
 City LUSBY State MD Zip Code 20657-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422697
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ENGELMAN, F., C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 748 GREY EAGLE CIRCLE S
 City COLORADO SPRINGS State CO Zip Code 80919-1614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376691
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1398 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGER, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1805
 City THOMPSON FALLS State MT Zip Code 59873-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REALTY NORTHWEST Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370177
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ENGLAND, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10802 NORTH 5750 WEST
 City HIGHLAND State UT Zip Code 84003-9035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383988
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ENGLAND, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10802 NORTH 5750 WEST
 City HIGHLAND State UT Zip Code 84003-9035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383998
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1399 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGLEADOW, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5944 CHAPMANS TRAIL

City CARMEL	State IN	Zip Code 46033-8644
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENGLEDON GROUP	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.411839

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. ENGLER, KURT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1520 MINTHAVEN ROAD

City LAKE FOREST	State IL	Zip Code 60045-
---------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) W L ENGLER DISTRIBUTION	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2016

Transaction ID : SA11A.362019

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. ENGLER, KURT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1520 MINTHAVEN ROAD

City LAKE FOREST	State IL	Zip Code 60045-
---------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) W L ENGLER DISTRIBUTION	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.374536

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1400 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGLISH, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 FOREST GARDEN DRIVE
 City KINGWOOD State TX Zip Code 77345-1630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 11 / 2016**
Transaction ID : SA11A.346823
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ENGLISH, KRYSZYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 GREEN ST.,
 City BOONTON State NJ Zip Code 07005-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358724
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. ENGLISH, KRYSZYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 759 GREEN ST.,
 City BOONTON State NJ Zip Code 07005-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.400973
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1401 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGLISH, KRYSZYNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 759 GREEN ST.,

City BOONTON	State NJ	Zip Code 07005-1609
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.400974

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ENGLISH, KRYSZYNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 759 GREEN ST.,

City BOONTON	State NJ	Zip Code 07005-1609
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420068

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ENGLISH, KRYSZYNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 759 GREEN ST.,

City BOONTON	State NJ	Zip Code 07005-1609
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420069

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1402 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGLISH, KRYSTYNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 759 GREEN ST.,

City BOONTON	State NJ	Zip Code 07005-1609
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420083

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ENGLISH, KRYSTYNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 759 GREEN ST.,

City BOONTON	State NJ	Zip Code 07005-1609
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420084

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ENLOE, HOWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 26486

City EL PASO	State TX	Zip Code 79926-6486
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIFE AMBULANCE SERVICE	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.400954

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1403 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ENNS, SHIRLEY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14100 W 90TH TERRACE
 APT. 205
 City LENEXA State KS Zip Code 66215-5428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347930
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ENO, WOODROW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8717 HERONS WALK
 City N CHARLESTON State SC Zip Code 29420-7444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391181
 Amount of Each Receipt this Period
 900.00
 Memo Item
 CONTRIBUTION

C. ENTORF, RICHARD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1904 WILDFLOWER CIRCLE
 City MEDFORD State OR Zip Code 97504-8636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406881
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1404 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EPSTEIN, CLIFFORD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18823 AVENUE BIARRITZ
 City LUTZ State FL Zip Code 33558-5309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPE SOLUTIONS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400734
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EPSTEIN, CLIFFORD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18823 AVENUE BIARRITZ
 City LUTZ State FL Zip Code 33558-5309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPE SOLUTIONS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403401
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EPSTEIN, CLIFFORD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18823 AVENUE BIARRITZ
 City LUTZ State FL Zip Code 33558-5309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPE SOLUTIONS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403410
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1405 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EPSTEIN, CLIFFORD, L., MR.,

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ State FL Zip Code 33558-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RPE SOLUTIONS Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414962

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EPSTEIN, CLIFFORD, L., MR.,

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ State FL Zip Code 33558-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RPE SOLUTIONS Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414965

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ERASMUS, DAVID, , ,

Mailing Address 1470 SHORELINE WAY

City HOLLYWOOD State FL Zip Code 33019-5006

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398848

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1406 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERASMUS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 SHORELINE WAY
 City HOLLYWOOD State FL Zip Code 33019-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.398849
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ERD, MARYLN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 674 RANDY LANE
 City WINTER PARK State FL Zip Code 32789-6139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTMINSTER WINTER PARK Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357579
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ERICKSON, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1573 CALLE CANDELA
 City LA JOLLA State CA Zip Code 92037-7108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.391237
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1407 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERICKSON, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1573 CALLE CANDELA
City LA JOLLA State CA Zip Code 92037-7108
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403053
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ERICKSON, HUBBARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4929 FOREST AVE 4B
City DOWNERS GROVE State IL Zip Code 60515-2873
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348407
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ERICKSON, HUBBARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4929 FOREST AVE 4B
City DOWNERS GROVE State IL Zip Code 60515-2873
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt **09 / 10 / 2016**
Transaction ID : SA11A.393759
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1408 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERICKSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18112 CLEARWATER CIRCLE
 City HUNTINGTON BEACH State CA Zip Code 92648-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.396400
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ERION, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7509
 City LOVELAND State CO Zip Code 80537-0509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMADA HOLDINGS LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350014
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ERION, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7509
 City LOVELAND State CO Zip Code 80537-0509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMADA HOLDINGS LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 20 / 2016**
Transaction ID : SA11A.376158
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1409 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERION, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 7509**

City LOVELAND	State CO	Zip Code 80537-0509
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARMADA HOLDINGS LLC	Occupation (for Individual) REAL ESTATE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400883

Amount of Each Receipt this Period

250.00

Memo Item
CONTRIBUTION

B. ERMER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7827 ABERDEEN RD**

City BETHESDA	State MD	Zip Code 20814-1101
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ERMER LAW GROUP PLLC	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1162.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359718

Amount of Each Receipt this Period

250.00

Memo Item
CONTRIBUTION

C. ERMER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7827 ABERDEEN RD**

City BETHESDA	State MD	Zip Code 20814-1101
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ERMER LAW GROUP PLLC	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1162.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388485

Amount of Each Receipt this Period

250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1410 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERMER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7827 ABERDEEN RD

City BETHESDA	State MD	Zip Code 20814-1101
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ERMER LAW GROUP PLLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1162.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.418592

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ERMER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7827 ABERDEEN RD

City BETHESDA	State MD	Zip Code 20814-1101
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ERMER LAW GROUP PLLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1162.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.418594

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ERMER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7827 ABERDEEN RD

City BETHESDA	State MD	Zip Code 20814-1101
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ERMER LAW GROUP PLLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1162.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.422504

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1411 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ERNST, RICHARD, , ,

Mailing Address 2721 PARKERS LANDING RD.

City MOUNT PLEASANT	State SC	Zip Code 29466-6739
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11A.355437

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ERNST, RICHARD, , ,

Mailing Address 2721 PARKERS LANDING RD.

City MOUNT PLEASANT	State SC	Zip Code 29466-6739
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11A.355441

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ERNST, RICHARD, , ,

Mailing Address 2721 PARKERS LANDING RD.

City MOUNT PLEASANT	State SC	Zip Code 29466-6739
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.394340

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1412 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ERNST, RICHARD, , ,

Mailing Address 2721 PARKERS LANDING RD.

City MOUNT PLEASANT	State SC	Zip Code 29466-6739
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.403086

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ERNST, RICHARD, , ,

Mailing Address 2721 PARKERS LANDING RD.

City MOUNT PLEASANT	State SC	Zip Code 29466-6739
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.403104

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ERNST, RICHARD, , ,

Mailing Address 2721 PARKERS LANDING RD.

City MOUNT PLEASANT	State SC	Zip Code 29466-6739
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.403106

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1413 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ERRECART, JOYCE, , ,

Mailing Address **2854 HARBOR ROAD**

City SHELBURNE	State VT	Zip Code 05482-7793
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 20 / 2016

Transaction ID : SA11A.400378

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ERVIN, PATRICIA, , ,

Mailing Address **599 AVON BEND ROAD**

City CHARLES TOWN	State WV	Zip Code 25414-4725
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 21 / 2016

Transaction ID : SA11A.352047

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ERVIN, PATRICIA, , ,

Mailing Address **599 AVON BEND ROAD**

City CHARLES TOWN	State WV	Zip Code 25414-4725
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 31 / 2016

Transaction ID : SA11A.359209

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1414 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ERVIN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 599 AVON BEND ROAD
 City CHARLES TOWN State WV Zip Code 25414-4725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374904
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. ERVIN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 599 AVON BEND ROAD
 City CHARLES TOWN State WV Zip Code 25414-4725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412225
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ERWIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 SOUTH 13TH
 City WACO State TX Zip Code 76701-1818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404930
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1415 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESBECK, RAMONA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 20TH STREET, UNIT B13
 City AMES State IA Zip Code 50010-5157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364225
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ESBECK, RAMONA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 20TH STREET, UNIT B13
 City AMES State IA Zip Code 50010-5157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406650
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ESKILDSEN, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 BAARSON BLVD
 City HELENA State MT Zip Code 59601-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381869
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1416 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESKILDSEN, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 BAARSON BLVD
 City HELENA State MT Zip Code 59601-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403664
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ESKILDSEN, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 BAARSON BLVD
 City HELENA State MT Zip Code 59601-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416167
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ESLER, EILEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 CRYSTAL LAKE RD
 City ENGIELD State NH Zip Code 03748-3743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390076
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1417 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESLER, EILEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 CRYSTAL LAKE RD

City ENGIELD	State NH	Zip Code 03748-3743
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405739

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ESLER, EILEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 CRYSTAL LAKE RD

City ENGIELD	State NH	Zip Code 03748-3743
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417988

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ESLER, EILEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 CRYSTAL LAKE RD

City ENGIELD	State NH	Zip Code 03748-3743
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417996

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1418 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ESPOSITO, CONSTANCE, , ,

Mailing Address **2024 DUMONT ROAD**

City **TIMONIUM** State **MD** Zip Code **21093-4410**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.382318

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ESPOSITO, CONSTANCE, , ,

Mailing Address **2024 DUMONT ROAD**

City **TIMONIUM** State **MD** Zip Code **21093-4410**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.382319

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ESPOSITO, CONSTANCE, , ,

Mailing Address **2024 DUMONT ROAD**

City **TIMONIUM** State **MD** Zip Code **21093-4410**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.382320

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1419 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTABROOKS, ROBERT, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 AUDUBON AVENUE
MC429

City NAPERVILLE State IL Zip Code 60563-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348811

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ESTABROOKS, ROBERT, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 AUDUBON AVENUE
MC429

City NAPERVILLE State IL Zip Code 60563-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348835

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ESTABROOKS, ROBERT, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2004 AUDUBON AVENUE
MC429

City NAPERVILLE State IL Zip Code 60563-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
08 / 25 / 2016
Transaction ID : SA11A.379794

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1420 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVENUE MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379795
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ESTABROOKS, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 AUDUBON AVENUE MC429
 City NAPERVILLE State IL Zip Code 60563-4194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391294
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ESTEP, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 TALL GRASS DRIVE
 City PLEASANT HILL State MO Zip Code 64080-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL PROGAM MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386525
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1421 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTEP, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 TALL GRASS DRIVE
 City PLEASANT HILL State MO Zip Code 64080-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL PROGAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422895
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. ESTEP, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 TALL GRASS DRIVE
 City PLEASANT HILL State MO Zip Code 64080-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL PROGAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422902
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. ESTES, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 CARRIE LYNN LANE
 City YORK State ME Zip Code 03909-5147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESTES OIL & PROPANE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346883
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1422 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ESTES, MICHAEL, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 CARRIE LYNN LANE

City YORK State ME Zip Code 03909-5147

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ESTES OIL & PROPANE Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349936

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. ESTES, MICHAEL, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 CARRIE LYNN LANE

City YORK State ME Zip Code 03909-5147

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ESTES OIL & PROPANE Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370236

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. ETHRIDGE, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 585 WEED ST.

City NEW CANAAN State CT Zip Code 06840-6128

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MATLINPATTERSON GLOBAL ADVISERS LLC Occupation (for Individual) INVESTOR

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413457

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1423 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ETNYRE, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 IL RT 64 W

City OREGON	State IL	Zip Code 61061-9352
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381336

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. ETZEL, K, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8630 ARBOR DRIVE

City EL CERRITO	State CA	Zip Code 94530-2753
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.378767

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ETZEL, K, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8630 ARBOR DRIVE

City EL CERRITO	State CA	Zip Code 94530-2753
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2016

Transaction ID : SA11A.382919

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1424 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EULE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4456 GREENWICH PARKWAY NW
 City WASHINGTON State DC Zip Code 20007-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. CHAMBER OF COMMERCE Occupation (for Individual) U.P CLIMATE & TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381519
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EULE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4456 GREENWICH PARKWAY NW
 City WASHINGTON State DC Zip Code 20007-2068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. CHAMBER OF COMMERCE Occupation (for Individual) U.P CLIMATE & TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414551
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EVANS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 FLINTLOCK ROAD
 City CHARLESTON State WV Zip Code 25314-2480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354535
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1425 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVANS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 FLINTLOCK ROAD
 City CHARLESTON State WV Zip Code 25314-2480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380023
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. EVANS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 FLINTLOCK ROAD
 City CHARLESTON State WV Zip Code 25314-2480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411711
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EVANS, HAROLD, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1821 FRONTIER ROAD
 City GREELEY State CO Zip Code 80634-3412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVANS GROUP LLC Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346809
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1426 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVANS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4480 GROVE STREET
 City SONOMA State CA Zip Code 95476-6047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362812
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EVANS, WHITNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4480 GROVE STREET
 City SONOMA State CA Zip Code 95476-6047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393855
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. EVERETT, ANNABELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ARMBRUSTER COURT
 City FROSTPROOF State FL Zip Code 33843-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346488
 Amount of Each Receipt this Period -1800.00
 Memo Item CONTRIBUTION
 CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ -1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1427 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVERETT, ANNABELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ARMBRUSTER COURT
 City FROSTPROOF State FL Zip Code 33843-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.411730
 Amount of Each Receipt this Period 450.00
 Memo Item CONTRIBUTION

B. EVERETT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8404 LA SIERRA
 City WHITTIER State CA Zip Code 90605-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349293
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EVERETT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8404 LA SIERRA
 City WHITTIER State CA Zip Code 90605-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359790
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1428 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVERETT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8404 LA SIERRA
 City WHITTIER State CA Zip Code 90605-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391866
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EVERHART, KAREN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18008 SHEPHERD VALLEY RD
 City GLENCOE State MO Zip Code 63038-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359187
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EVERHART, KAREN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18008 SHEPHERD VALLEY RD
 City GLENCOE State MO Zip Code 63038-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417324
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1429 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EVERSOLE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2118 BIRNAM WOOD DRIVE
 City SANTA BARBARA State CA Zip Code 93108-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376680
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. EVOY JR, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2414 W. 139TH PLACE
 City BLUE ISLAND State IL Zip Code 60406-3265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIBRE DRUM SALES, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415359
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EWALD, DIETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23499 KINGSBURY ROAD
 City MIDDLETON State ID Zip Code 83644-5625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEM FILTER COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396584
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1430 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EWART, NED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11700 FM 2657
 City KEMPNER State TX Zip Code 76539-3814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372535
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. EWING, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 BRONK STREET
 City MONTE VISTA State CO Zip Code 81144-1136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2016
Transaction ID : SA11A.346021
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. EWING, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 BRONK STREET
 City MONTE VISTA State CO Zip Code 81144-1136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376919
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1431 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EWING, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 BRONK STREET
 City MONTE VISTA State CO Zip Code 81144-1136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.395905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EWING, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4628 S QUIET WAY
 City GILBERT State AZ Zip Code 85297-0895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350770
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EWING, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4628 S QUIET WAY
 City GILBERT State AZ Zip Code 85297-0895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372421
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1432 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EWING, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4628 S QUIET WAY
 City GILBERT State AZ Zip Code 85297-0895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372422
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EWING, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4628 S QUIET WAY
 City GILBERT State AZ Zip Code 85297-0895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372429
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. EWING, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4628 S QUIET WAY
 City GILBERT State AZ Zip Code 85297-0895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372432
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1433 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EWLES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1789 PORT STANHOPE

City NEWPORT BEACH	State CA	Zip Code 92660-7103
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN B. EWLES INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390383

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. EYESTONE, MAYNARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2803 E WINGER RD

City MEAD	State WA	Zip Code 99021-9618
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354490

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. EYESTONE, MAYNARD, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2803 E WINGER RD

City MEAD	State WA	Zip Code 99021-9618
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379993

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1434 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EYESTONE, MAYNARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392066
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. EYESTONE, MAYNARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402260
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. EYESTONE, MAYNARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408653
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1435 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. EYMARD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4910 BOULDER TRACE LANE
 City KATY State TX Zip Code 77449-7706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.347363
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EYMARD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4910 BOULDER TRACE LANE
 City KATY State TX Zip Code 77449-7706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392061
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. EZZELL, R. DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 IDLE HOUR DRIVE, APT 1
 City LEXINGTON State KY Zip Code 40502-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUY EZZELL INC Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379442
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1436 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FAGA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3166 JUNIPER LANE
 City FALLS CHURCH State VA Zip Code 22044-1814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 02 / 2016
Transaction ID : SA11A.358910
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. FAGA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3166 JUNIPER LANE
 City FALLS CHURCH State VA Zip Code 22044-1814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390235
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FAGIN, DAVID, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 GLENMOOR DRIVE
 City ENGLEWOOD State CO Zip Code 80113-7115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376699
 Amount of Each Receipt this Period 600.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1437 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FAILLACE, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address !3030 CONIFER RD.
 City HOUSTON State TX Zip Code 77079-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.382931
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FAILLACE, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address !3030 CONIFER RD.
 City HOUSTON State TX Zip Code 77079-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420026
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FAILLACE, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address !3030 CONIFER RD.
 City HOUSTON State TX Zip Code 77079-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420032
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1438 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAIRBANKS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1946 WYOMING ST
 City BREMERTON State WA Zip Code 98310-4756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350527
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FAIRBANKS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1946 WYOMING ST
 City BREMERTON State WA Zip Code 98310-4756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353858
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FAIRBANKS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1946 WYOMING ST
 City BREMERTON State WA Zip Code 98310-4756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372879
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1439 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAIRBANKS, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1946 WYOMING ST

City BREMERTON	State WA	Zip Code 98310-4756
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 18 / 2016
Transaction ID : SA11A.372880

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FAIRBANKS, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1946 WYOMING ST

City BREMERTON	State WA	Zip Code 98310-4756
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.387099

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FAIRBANKS, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1946 WYOMING ST

City BREMERTON	State WA	Zip Code 98310-4756
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 23 / 2016
Transaction ID : SA11A.405388

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1440 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAIRBANKS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1946 WYOMING ST
 City BREMERTON State WA Zip Code 98310-4756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419397
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FAIRBANKS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1946 WYOMING ST
 City BREMERTON State WA Zip Code 98310-4756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419824
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FAIRSERVIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1721 GOODSTEIN DR
 City CASPER State WY Zip Code 82601-6222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRANITE PEAK GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368147
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1441 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAIRSERVIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1721 GOODSTEIN DR
 City CASPER State WY Zip Code 82601-6222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRANITE PEAK GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398726
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FALBO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 W. MORNINGSIDE CT.
 City FRANKLIN State WI Zip Code 53132-2708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407840
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. FALCK, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 WASHINGTON ST 100
 City MYSTIC State CT Zip Code 06355-2816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FALCK EYE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358042
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1442 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FALCK, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 WASHINGTON ST
 100
 City MYSTIC State CT Zip Code 06355-2816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FALCK EYE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358043
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. FALCK, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 WASHINGTON ST
 100
 City MYSTIC State CT Zip Code 06355-2816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FALCK EYE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372290
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FALCONER, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4525 SW NATCHEZ CT.
 City TUALATIN State OR Zip Code 97062-8769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.349951
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1443 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FANNI , LIZ, E., MS.,
 Mailing Address 5024 DICKENS LANE
 City CARROLLTON State TX Zip Code 75010-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355614
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FANNI , LIZ, E., MS.,
 Mailing Address 5024 DICKENS LANE
 City CARROLLTON State TX Zip Code 75010-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386424
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FANNI , LIZ, E., MS.,
 Mailing Address 5024 DICKENS LANE
 City CARROLLTON State TX Zip Code 75010-4915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386425
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1444 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FANNI, LIZ, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5024 DICKENS LANE
City CARROLLTON State TX Zip Code 75010-4915
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11A.400771
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FANO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5959 COLLINS AVENUE UNIT 801
City MIAMI BEACH State FL Zip Code 33140-2290
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355366
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FANO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5959 COLLINS AVENUE UNIT 801
City MIAMI BEACH State FL Zip Code 33140-2290
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380752
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1445 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARGHER, LAWRENCE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 KIELY BLVD. #200
 200
 City SANTA CLARA State CA Zip Code 95051-5373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369983
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2016
Transaction ID : SA11A.344233
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FARID, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 SHIRLEY AVE.
 City STATEN ISLAND State NY Zip Code 10312-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351999
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1446 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARID, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 SHIRLEY AVE.
City STATEN ISLAND State NY Zip Code 10312-5455
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356332
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. FARID, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 SHIRLEY AVE.
City STATEN ISLAND State NY Zip Code 10312-5455
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383078
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. FARID, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 SHIRLEY AVE.
City STATEN ISLAND State NY Zip Code 10312-5455
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.411266
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1447 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARIES, CHARLES, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12535 SW IRON MTN. BLVD.
 City PORTLAND State OR Zip Code 97219-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372805
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FARIES, CHARLES, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12535 SW IRON MTN. BLVD.
 City PORTLAND State OR Zip Code 97219-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412564
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FARINA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PALMA ROAD
 City SOMERS State NY Zip Code 10589-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST-FAIR ELECTRIC Occupation (for Individual) ELECTRIC CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 07 / 27 / 2016
Transaction ID : SA11A.356320
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1448 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARINA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PALMA ROAD
 City SOMERS State NY Zip Code 10589-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST-FAIR ELECTRIC Occupation (for Individual) ELECTRIC CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383083
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FARINA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PALMA ROAD
 City SOMERS State NY Zip Code 10589-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST-FAIR ELECTRIC Occupation (for Individual) ELECTRIC CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411323
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FARLEY, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 W 13TH STREET, APT 9E
 City NEW YORK State NY Zip Code 10011-7864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRINKER BIDDLE & REATH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377588
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1449 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARMER, GARY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 LAKE CLIFF TRAIL
 City AUSTIN State TX Zip Code 78746-4678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERITAGE TITLE Occupation (for Individual) TITLE INSURANCE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.346112
 Amount of Each Receipt this Period **5000.00**
 Memo Item CONTRIBUTION

B. FARMER, R., T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6847 CINTAS BOUELVARD SUITE 120
 City MASON State OH Zip Code 45040-9101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CINTAS CORP. Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **38500.00**

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.401701
 Amount of Each Receipt this Period **1000.00**
 Memo Item CONTRIBUTION

C. FARN, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1939 WILDWOOD PLACE
 City MOBILE State AL Zip Code 36609-2579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378630
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1450 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARNSWORTH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 CEDAR LANE
 City HILTON HEAD ISLAND State SC Zip Code 29926-1052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417174
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FARR, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 WINFIELD AVE.
 City GOLDEN VALLEY State MN Zip Code 55422-3440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382246
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FARR, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 WINFIELD AVE.
 City GOLDEN VALLEY State MN Zip Code 55422-3440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382247
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1451 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARR, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2330 WINFIELD AVE.

City GOLDEN VALLEY	State MN	Zip Code 55422-3440
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.382249

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FARR, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2330 WINFIELD AVE.

City GOLDEN VALLEY	State MN	Zip Code 55422-3440
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2016

Transaction ID : SA11A.392087

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. FARR, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2330 WINFIELD AVE.

City GOLDEN VALLEY	State MN	Zip Code 55422-3440
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.405845

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1452 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARR, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2330 WINFIELD AVE.
City GOLDEN VALLEY State MN Zip Code 55422-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412903
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FARRELL, LEE ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 17786 DES MOINES MEMORIAL DR
City SEATTLE State WA Zip Code 98148-2794
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367977
Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. FARROW, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address W156N8278 PILGRIM RD
City MENOMONEE FALLS State WI Zip Code 53051-3744
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FARROW & ASSOCIATES Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411226
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1453 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAST, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1253 MADISON ROAD
 City FOSTORIA State OH Zip Code 44830-1632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347816
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. FAST, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1253 MADISON ROAD
 City FOSTORIA State OH Zip Code 44830-1632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361378
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. FAST, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1253 MADISON ROAD
 City FOSTORIA State OH Zip Code 44830-1632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.370938
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1454 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FATA, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 TEKENING DRIVE
 City TENAFLY State NJ Zip Code 07670-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394955
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FAUCHER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 TEABERRY PATH
 City BOONE State NC Zip Code 28607-8511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.369156
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FAUCHER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 TEABERRY PATH
 City BOONE State NC Zip Code 28607-8511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407898
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1455 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAULKNER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1S575 NIMITZ RD
 City OAKBROOK TERRACE State IL Zip Code 60181-4023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344507
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. FAULKNER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1S575 NIMITZ RD
 City OAKBROOK TERRACE State IL Zip Code 60181-4023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344508
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. FAULKNER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1S575 NIMITZ RD
 City OAKBROOK TERRACE State IL Zip Code 60181-4023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.363048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	362.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1456 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAULKNER, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1S575 NIMITZ RD

City OAKBROOK TERRACE	State IL	Zip Code 60181-4023
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
662.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.369101

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FAULKNER, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1S575 NIMITZ RD

City OAKBROOK TERRACE	State IL	Zip Code 60181-4023
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
662.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412740

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FAULKNER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 FIFEMOOR CT

City CARY	State NC	Zip Code 27518-9025
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAULKNER/HAYNES & ASSOCIATES	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372869

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1457 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FAULKNER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 FIFEMOOR CT
 City CARY State NC Zip Code 27518-9025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAULKNER/HAYNES & ASSOCIATES Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372870
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FAULKNER, ROYCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1703 MICHAEL STREET
 City AUSTIN State TX Zip Code 78704-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397021
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. FAVRE, ART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 82285
 City BATON ROUGE State LA Zip Code 70884-2285
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONTRACTORS, INC. Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404793
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7800.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1458 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAWER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 RIVERSIDE DRIVE
12A

City NEW YORK State NY Zip Code 10025-9010

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416214

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

B. FEASLER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2507 LARKSPUR DR

City PARK CITY State UT Zip Code 84060-7055

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357332

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. FEASLER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2507 LARKSPUR DR

City PARK CITY State UT Zip Code 84060-7055

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397711

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1459 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEASLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2507 LARKSPUR DR
 City PARK CITY State UT Zip Code 84060-7055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417535
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FEATHERSTON, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1709 CAMELOT DR.
 City TRENTON State MI Zip Code 48183-1951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352226
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. FEATHERSTON, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1709 CAMELOT DR.
 City TRENTON State MI Zip Code 48183-1951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358073
 Amount of Each Receipt this Period
 40.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1460 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEATHERSTON, CLAUDIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1709 CAMELOT DR.

City TRENTON	State MI	Zip Code 48183-1951
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407613

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. FEDERICO, ANTHONY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12306 VAN NUYS BOULEVARD

City LAKE VIEW TERRACE	State CA	Zip Code 91342-6049
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUPERIOR GUNITE	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.380934

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. FEDERICO, ANTHONY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12306 VAN NUYS BOULEVARD

City LAKE VIEW TERRACE	State CA	Zip Code 91342-6049
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUPERIOR GUNITE	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411728

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	475.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1461 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEDERICO, ANTHONY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12306 VAN NUYS BOULEVARD
 City LAKE VIEW TERRACE State CA Zip Code 91342-6049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUPERIOR GUNITE Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417037
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. FEDERER, B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address COZUMEL PLACE
 City SIMI VALLEY State CA Zip Code 93065-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380373
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. FEDERER, B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address COZUMEL PLACE
 City SIMI VALLEY State CA Zip Code 93065-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382060
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1462 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEDERER, B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **COZUMEL PLACE**
 City **SIMI VALLEY** State **CA** Zip Code **93065-**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **625.00**

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.398123
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

B. FEDERER, B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **COZUMEL PLACE**
 City **SIMI VALLEY** State **CA** Zip Code **93065-**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **625.00**

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403993
 Amount of Each Receipt this Period **75.00**
 Memo Item
CONTRIBUTION

C. FEDERER, B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **COZUMEL PLACE**
 City **SIMI VALLEY** State **CA** Zip Code **93065-**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ **625.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418853
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1463 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2455 DELAWARE AVE.
 City MENDOTA HEIGHTS State MN Zip Code 55118-4806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VWM Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376035
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FEIDLER, M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 CHATHAM ROAD, NW
 City ATLANTA State GA Zip Code 30305-1101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSOUTH EQUITY PARTNERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375643
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. FEIDLER, M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 CHATHAM ROAD, NW
 City ATLANTA State GA Zip Code 30305-1101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSOUTH EQUITY PARTNERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407421
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1464 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FEJES, DEAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 COCOHATCHEE DRIVE
 City NAPLES State FL Zip Code 34110-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2016
Transaction ID : SA11A.346910
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FEJES, DEAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 COCOHATCHEE DRIVE
 City NAPLES State FL Zip Code 34110-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397798
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FEJES, DEAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 COCOHATCHEE DRIVE
 City NAPLES State FL Zip Code 34110-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399381
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1465 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELDMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 HIGHLINE CROSSING
 City SILVERTHORNE State CO Zip Code 80443-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388170
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. FELDMAN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 HIGHLINE CROSSING
 City SILVERTHORNE State CO Zip Code 80443-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419305
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. FELDMAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 BAYSIDE DR.
 City CLEARWATER State FL Zip Code 33767-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.366990
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1466 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELIPE, JOSE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1705 W HEMINGWAY DRIVE
 City JUNO BEACH State FL Zip Code 33408-2251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395824
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FELLIN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1275 WESTERN SKIES TR
 City STEVENSVILLE State MT Zip Code 59870-6821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390629
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FELLIN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1275 WESTERN SKIES TR
 City STEVENSVILLE State MT Zip Code 59870-6821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397690
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1467 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELLIN, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1275 WESTERN SKIES TR

City STEVENSVILLE	State MT	Zip Code 59870-6821
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408457

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FELLMAN, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12989 CHAPARRAL RIDGE RD.

City SAN DIEGO	State CA	Zip Code 92130-2454
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QVIDIUM TECHNOLOGIES, INC.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385888

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FELLMAN, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12989 CHAPARRAL RIDGE RD.

City SAN DIEGO	State CA	Zip Code 92130-2454
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QVIDIUM TECHNOLOGIES, INC.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408770

Amount of Each Receipt this Period
180.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1468 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELSBURG, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2902 HAMPTON PLACE COURT
 City PLANT CITY State FL Zip Code 33566-9321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386475
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.363242
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382253
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1469 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389190
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391871
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FELTEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32441 EAGALESET AVE
 City AGUA DULCE State CA Zip Code 91390-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCI Occupation (for Individual) EXECUTIVE ASSIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416912
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1470 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FENNA, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 WEST RIVER PARKWAY
 City CHAMPLIN State MN Zip Code 55316-1291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381863
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FENNA, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 WEST RIVER PARKWAY
 City CHAMPLIN State MN Zip Code 55316-1291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381865
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FENNA, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 WEST RIVER PARKWAY
 City CHAMPLIN State MN Zip Code 55316-1291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422570
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1471 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FENNELL, JOHN, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 TERRACE COURT
 City LOS ALTOS State CA Zip Code 94024-3158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN & WAKEFIELD Occupation (for Individual) SENIOR DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377131
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. FENNELL, JOHN, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 TERRACE COURT
 City LOS ALTOS State CA Zip Code 94024-3158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN & WAKEFIELD Occupation (for Individual) SENIOR DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406985
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. FENNELL, JUDITH, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 TROUT STREET
 City PALACIOS State TX Zip Code 77465-1753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357950
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1472 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FENNELL, JUDITH, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 TROUT STREET
 City PALACIOS State TX Zip Code 77465-1753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.401691
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. FENOGLIO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 RADLEY DR.
 City WEST CHESTER State PA Zip Code 19382-8089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370827
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FENOGLIO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 RADLEY DR.
 City WEST CHESTER State PA Zip Code 19382-8089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 235.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1473 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERDINAND, WILLIAM, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 GUINEA ROAD
 City GREENWICH State CT Zip Code 06830-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383643
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FERDINAND, WILLIAM, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 GUINEA ROAD
 City GREENWICH State CT Zip Code 06830-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402393
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FERDINAND, WILLIAM, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 GUINEA ROAD
 City GREENWICH State CT Zip Code 06830-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402394
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1474 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERGER, JANE, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 BAY RIDGE ROAD
 City KEY LARGO State FL Zip Code 33037-3779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390709
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FERNANDEZ, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 BANYAN DR
 City CORAL GABLES State FL Zip Code 33156-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL FLOWERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360204
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FERNANDEZ, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 BANYAN DR
 City CORAL GABLES State FL Zip Code 33156-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL FLOWERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384660
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1475 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERNANDEZ, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5441 BANYAN DR
 City CORAL GABLES State FL Zip Code 33156-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL FLOWERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419539
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. FERRANTE, DOMENIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 16TH AVE S
 City NAPLES State FL Zip Code 34102-7442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAIN CAPITAL LLC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414733
 Amount of Each Receipt this Period 2700.00
 Memo Item
 CONTRIBUTION

C. FERRIER, EDWARD, CORDA, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24521 PEACHLAND AVENUE
 City NEWHALL State CA Zip Code 91321-3458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396394
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 3450.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1476 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERRIMAN, GARY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3453 MAUTZ YEAGER RD
 City MARION State OH Zip Code 43302-8311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHOWPLACE INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.377504
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FERRIER, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 KING RICHARD
 City SAN ANT尼奥 State TX Zip Code 78229-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346527
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FERRIER, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 KING RICHARD
 City SAN ANT尼奥 State TX Zip Code 78229-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353573
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1477 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERRIER, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 KING RICHARD
 City SAN ANT尼奥 State TX Zip Code 78229-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353574
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FERRIER, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 KING RICHARD
 City SAN ANT尼奥 State TX Zip Code 78229-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365119
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FERRIER, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 KING RICHARD
 City SAN ANT尼奥 State TX Zip Code 78229-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 11 / 2016**
Transaction ID : SA11A.393689
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1478 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERRIER, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 KING RICHARD

City SAN ANT尼奥	State TX	Zip Code 78229-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403042

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FERRIER, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 KING RICHARD

City SAN ANT尼奥	State TX	Zip Code 78229-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403055

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FERRIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9754 GREEN ISLAND COVE

City WINDERMERE	State FL	Zip Code 34786-8953
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350518

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1479 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FERY, JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2016
Mailing Address 350 N 9TH STREET SUITE 200		Transaction ID : SA11A.347684
City BOISE	State ID ID	Zip Code 83702-5469
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FICHTHORN, LUKE, E., , III		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 18 / 2016
Mailing Address 430 COCONUT PALM RD		Transaction ID : SA11A.348738
City VERO BEACH	State FL	Zip Code 32963-3709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FICHTHORN, LUKE, E., , III		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 18 / 2016
Mailing Address 430 COCONUT PALM RD		Transaction ID : SA11A.348760
City VERO BEACH	State FL	Zip Code 32963-3709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1480 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FICHTHORN, LUKE, E., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 COCONUT PALM RD
 City VERO BEACH State FL Zip Code 32963-3709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379788
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FICK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10713 JOSHUA LANE
 City FREDERICKSBURG State VA Zip Code 22408-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JF FICK INC Occupation (for Individual) CORPORATE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346863
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. FIDDELKE, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 N VINCENNES CIR
 City NORTH BAY State WI Zip Code 53402-3656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391351
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1481 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349281
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359311
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370068
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1482 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396939
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIEDLER, JEFFERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4573 NORTH OAKVIEW
 City CHICAGO State IL Zip Code 60656-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422537
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353293
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1483 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372127
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372136
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375681
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1484 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOEL BRUCE FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.401021

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOEL BRUCE FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402884

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FIELDMAN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577-2738
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOEL BRUCE FIELDMAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.404175

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1485 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417822
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417827
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417828
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1486 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIELDMAN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOEL BRUCE FIELDMAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417837
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIELD, JOHN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 GOSHEN ROAD
 City LITCHFIELD State CT Zip Code 06759-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407008
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. FIELER, SEAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HASLET AVE.
 City PRINCETON State NJ Zip Code 08540-4914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EQUINOX PARTNERS Occupation (for Individual) FINANCIAL ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391522
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1487 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIGG, JEANIE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3625 49TH STREET NW
 City WASHINGTON State DC Zip Code 20016-3214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348705
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIGG, JEANIE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3625 49TH STREET NW
 City WASHINGTON State DC Zip Code 20016-3214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350601
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FIGUEROA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3404 RIDGEMONT DRIVE
 City MOUNTAIN VIEW State CA Zip Code 94040-4541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366006
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1488 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FILLBRANDT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 BRIDGE PORT LANE
 City BAKERSFIELD State CA Zip Code 93309-3470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361179
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FILLMAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 STONE CREEK COURT
 City FRIENDSWOOD State TX Zip Code 77546-2541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COASTAL FLOW Occupation (for Individual) GAS MEASUREMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355301
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FILLMAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 STONE CREEK COURT
 City FRIENDSWOOD State TX Zip Code 77546-2541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COASTAL FLOW Occupation (for Individual) GAS MEASUREMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374596
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1489 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FILLMAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 STONE CREEK COURT
 City FRIENDSWOOD State TX Zip Code 77546-2541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COASTAL FLOW Occupation (for Individual) GAS MEASUREMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402938
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FILLMAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 STONE CREEK COURT
 City FRIENDSWOOD State TX Zip Code 77546-2541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COASTAL FLOW Occupation (for Individual) GAS MEASUREMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402939
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FILSTRUP, ALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 WOODSHIRE DRIVE
 City PITTSBURGH State PA Zip Code 15215-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404846
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1490 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FILSTRUP, ALVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 165 WOODSHIRE DRIVE

City PITTSBURGH	State PA	Zip Code 15215-1730
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404847

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. FINDLAY, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1299 TRAIL VIEW PL

City NIPOMO	State CA	Zip Code 93444-6663
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386213

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FINDLAY, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1299 TRAIL VIEW PL

City NIPOMO	State CA	Zip Code 93444-6663
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407706

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1491 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7608 N 127TH E AVE
 City OWASSO State OK Zip Code 74055-7943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.358492
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FINE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7608 N 127TH E AVE
 City OWASSO State OK Zip Code 74055-7943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382833
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FINE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7608 N 127TH E AVE
 City OWASSO State OK Zip Code 74055-7943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413116
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1492 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7608 N 127TH E AVE
 City OWASSO State OK Zip Code 74055-7943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414039
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FINE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 BROOK DRIVE
 City MILLTOWN State NJ Zip Code 08850-1932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388267
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FINE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 BROOK DRIVE
 City MILLTOWN State NJ Zip Code 08850-1932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418821
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1493 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 BROOK DRIVE
 City MILLTOWN State NJ Zip Code 08850-1932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.418825
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. FINE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 BROOK DRIVE
 City MILLTOWN State NJ Zip Code 08850-1932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.418847
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. FINGER, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1307 HACKBERRY LANE
 City WINNETKA State IL Zip Code 60093-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 07 / 28 / 2016
Transaction ID : SA11A.357504
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1494 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINGER, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1307 HACKBERRY LANE
 City WINNETKA State IL Zip Code 60093-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : SA11A.382706
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FINGER, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1307 HACKBERRY LANE
 City WINNETKA State IL Zip Code 60093-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384690
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FINGER, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1307 HACKBERRY LANE
 City WINNETKA State IL Zip Code 60093-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.413000
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1495 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINKE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4920 HARDISON RD
 City CHARLOTTE State NC Zip Code 28226-6418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BABSON CAPITAL MANAGEMENT LLC Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.359987
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 CONTRIBUTION

B. FINNANE, DANIEL, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46300 AMETHYST
 City INDIAN WELLS State CA Zip Code 92210-8611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1346.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359846
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

C. FINOCCHARIO, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROBIN DRIVE
 City ROCHESTER State NY Zip Code 14618-4824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B & L WHOLESALE SUPPLY Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399462
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5682.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1496 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt 07 / 04 / 2016
Transaction ID : SA11A.344193
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348631
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348637
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	281.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1497 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355507
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372732
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409541
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1498 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418256
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FIOLA, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4602 GARDEN GROVE
 City I COLUMBIA State MO Zip Code 65203-9735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 881.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418258
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FIORE, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 893 AMHERST LANE
 City WESTMINSTER State MD Zip Code 21158-4350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358943
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1499 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FIORE, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 893 AMHERST LANE
 City WESTMINSTER State MD Zip Code 21158-4350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 08 / 01 / 2016
Transaction ID : SA11A.358944
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FIORE, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 893 AMHERST LANE
 City WESTMINSTER State MD Zip Code 21158-4350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : SA11A.377049
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FIRMAGE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 E ARLINGTON DRIVE
 City SALT LAKE CITY State UT Zip Code 84103-4428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381362
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1500 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FISCHER, DAVID, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1795 MAPLELAWN DR

City TROY	State MI	Zip Code 48084-4609
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SUBURBAN COLLECTION	Occupation (for Individual) CHAIRMAN & CEO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.421212

Amount of Each Receipt this Period
100000.00

Memo Item CONTRIBUTION

B. FISCHER, FRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N21W4260 CUMBERLAND DR. 27E

City PEWAUKEE	State WI	Zip Code 53072-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355729

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FISCHER, FRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N21W4260 CUMBERLAND DR. 27E

City PEWAUKEE	State WI	Zip Code 53072-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380699

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1501 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISCHER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N21W4260 CUMBERLAND DR. 27E
 City PEWAUKEE State WI Zip Code 53072-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407959
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FISCHER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N21W4260 CUMBERLAND DR. 27E
 City PEWAUKEE State WI Zip Code 53072-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415763
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FISCHER, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1255 25TH ST NW
 227
 City WASHINGTON State DC Zip Code 20037-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SHELK FISCHER FAMILY FOUNDATION Occupation (for Individual) VP/ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.376377
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1502 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISCUS, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 CRICKET LN
 City HUNTINGTON State CT Zip Code 06484-3430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365233
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. FISHER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3814 IVANHOE LANE
 City ALEXANDRIA State VA Zip Code 22310-2170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMGA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413320
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FISHEL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6420 E VALLEY COURT
 City NASHVILLE State TN Zip Code 37205-3533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389083
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1503 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3040 JAVA ROAD
 City COSTA MESA State CA Zip Code 92626-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349781
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FISHER, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3040 JAVA ROAD
 City COSTA MESA State CA Zip Code 92626-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349783
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FISHER, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3040 JAVA ROAD
 City COSTA MESA State CA Zip Code 92626-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386033
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1504 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3040 JAVA ROAD
 City COSTA MESA State CA Zip Code 92626-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390260
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. FISHER, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3040 JAVA ROAD
 City COSTA MESA State CA Zip Code 92626-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390262
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. FISHER, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3040 JAVA ROAD
 City COSTA MESA State CA Zip Code 92626-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398505
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1505 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, JUELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6200 ST. HELENA ROAD
 City SANTA ROSA State CA Zip Code 95404-9692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349516
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. FISHER, JUELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6200 ST. HELENA ROAD
 City SANTA ROSA State CA Zip Code 95404-9692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374696
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. FISHER, JUELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6200 ST. HELENA ROAD
 City SANTA ROSA State CA Zip Code 95404-9692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399606
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	177.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1506 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, LAUREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 LA PARA AVE
 City PALO ALTO State CA Zip Code 94306-2648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421957
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. FISHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E BRIDGES DR
 City LANDRUM State SC Zip Code 29356-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348374
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FISHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E BRIDGES DR
 City LANDRUM State SC Zip Code 29356-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348378
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1507 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FISHER, MARLENE, , ,

Mailing Address 105 E BRIDGES DR

City LANDRUM	State SC	Zip Code 29356-1805
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357397

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FISHER, MARLENE, , ,

Mailing Address 105 E BRIDGES DR

City LANDRUM	State SC	Zip Code 29356-1805
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362183

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FISHER, MARLENE, , ,

Mailing Address 105 E BRIDGES DR

City LANDRUM	State SC	Zip Code 29356-1805
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
222.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372295

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1508 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E BRIDGES DR
 City LANDRUM State SC Zip Code 29356-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396619
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FISHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E BRIDGES DR
 City LANDRUM State SC Zip Code 29356-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418647
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FISHER, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E BRIDGES DR
 City LANDRUM State SC Zip Code 29356-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418667
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1509 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, MARLENE, P., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6413 S 1680 E

City SALT LAKE CITY	State UT	Zip Code 84121-2571
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) HOMEMAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
09 / 13 / 2016
Transaction ID : SA11A.394711

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FISHERING, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13744 6100 ROAD

City MONTROSE	State CO	Zip Code 81403-8067
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016
Transaction ID : SA11A.383414

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. FITKIN, GLENN, L., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1633 CREEK RUN DRIVE

City TOLEDO	State OH	Zip Code 43614-1277
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016
Transaction ID : SA11A.364308

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1510 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZGERALD, MICHAEL, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 LAURELWOOD

City BERNARDSVILLE	State NJ	Zip Code 07924-2115
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394730

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. FITZPATRICK, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1569 SHENANDOAH LANE

City NAPERVILLE	State IL	Zip Code 60563-1419
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNETWORX SYSTEMS, INC.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353649

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. FITZPATRICK, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1569 SHENANDOAH LANE

City NAPERVILLE	State IL	Zip Code 60563-1419
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNETWORX SYSTEMS, INC.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390540

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1511 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZPATRICK, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 SHENANDOAH LANE
 City NAPERVILLE State IL Zip Code 60563-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNETWORX SYSTEMS, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394389
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FITZPATRICK, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 SHENANDOAH LANE
 City NAPERVILLE State IL Zip Code 60563-1419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNETWORX SYSTEMS, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404157
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FITZPATRICK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1995 JENNY RIDGE RD.
 City CARRIER MILLS State IL Zip Code 62917-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352546
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1512 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZPATRICK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1995 JENNY RIDGE RD.
 City CARRIER MILLS State IL Zip Code 62917-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396866
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FITZPATRICK, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 631 N WILCOX AVE 3D
 City LOS ANGELES State CA Zip Code 90004-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350082
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FITZPATRICK, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 631 N WILCOX AVE 3D
 City LOS ANGELES State CA Zip Code 90004-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369084
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1513 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FITZPATRICK, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 631 N WILCOX AVE 3D
 City LOS ANGELES State CA Zip Code 90004-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387124
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FITZPATRICK, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 631 N WILCOX AVE 3D
 City LOS ANGELES State CA Zip Code 90004-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391138
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FITZPATRICK, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6431 NORWOOD
 City MISSION HILLS State KS Zip Code 66208-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BAR OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371223
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1514 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FITZSIMONS, JR., HUGH, , ,			Date of Receipt MM / DD / YYYY 07 / 19 / 2016
Mailing Address P.O. BOX 130353			Transaction ID : SA11A.349162
City HOUSTON	State TX	Zip Code 77219-0353	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FLAGSTAD, GEOFFREY, L., MR.,			Date of Receipt MM / DD / YYYY 07 / 22 / 2016
Mailing Address 406 W WASHINGTON ST			Transaction ID : SA11A.353809
City VERSAILLES	State MO	Zip Code 65084-1380	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FLAGSTAD, GEOFFREY, L., MR.,			Date of Receipt MM / DD / YYYY 08 / 22 / 2016
Mailing Address 406 W WASHINGTON ST			Transaction ID : SA11A.375772
City VERSAILLES	State MO	Zip Code 65084-1380	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1515 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLAHERTY, GERALD, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7510 N EDGEWIL DDRIVE

City PEORIA	State IL	Zip Code 61614-2164
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.383523

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. FLAHERTY, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1117 LAWSON COVE CIRCLE

City VIRGINIA BEACH	State VA	Zip Code 23455-6824
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA ASSET MANAGEMENT	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
07 / 30 / 2016
Transaction ID : SA11A.359926

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

C. FLAHERTY, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1117 LAWSON COVE CIRCLE

City VIRGINIA BEACH	State VA	Zip Code 23455-6824
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA ASSET MANAGEMENT	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
236.00

Date of Receipt
08 / 30 / 2016
Transaction ID : SA11A.384804

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	618.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1516 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLAHERTY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 LAWSON COVE CIRCLE
 City VIRGINIA BEACH State VA Zip Code 23455-6824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA ASSET MANAGEMENT Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419613
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. FLAHERTY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 547 E WISCONSIN AVE.
 City NEENAH State WI Zip Code 54956-2966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362296
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FLANAGAN, ELIZABETH, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 NAHANT STREET
 City BETHESDA State MD Zip Code 20816-2336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417711
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1809.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1517 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLANNERY, PHILLIPPE, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 RAYMOND AVENUE

City SOMERVILLE	State MA	Zip Code 02144-1209
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COMPANY CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.381247

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FLATHE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 NW 30TH PLACE
109

City POMPANO BEACH	State FL	Zip Code 33069-0701
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEORGIA METAL CORP	Occupation (for Individual) A/C CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 23 / 2016
Transaction ID : SA11A.409437

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. FLATHE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2301 NW 30TH PLACE
109

City POMPANO BEACH	State FL	Zip Code 33069-0701
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEORGIA METAL CORP	Occupation (for Individual) A/C CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 28 / 2016
Transaction ID : SA11A.412316

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1518 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLECKNER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 WALTER LANE

City MANHASSET	State NY	Zip Code 11030-1652
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : SA11A.369181

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FLECKNER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 WALTER LANE

City MANHASSET	State NY	Zip Code 11030-1652
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.375043

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FLEETMAN, STEPHANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 357 MOUNT ALVERNO ROAD

City MEDIA	State PA	Zip Code 19063-5313
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MUSTANG EXPEDITING.COM	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379879

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1519 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLEGEL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 E FOUR MILE RD
 City RACINE State WI Zip Code 53402-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RELIANCE CONTROLS CORP Occupation (for Individual) MFG EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390527
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FLEIS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 DONEGAL DRIVE
 City MELBOURNE State FL Zip Code 32940-6074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLEIS ENGINEERING & CONSULTING Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400742
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FLEISHER, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 PLATT AVE #652
 City WEST HILLS State CA Zip Code 91307-3218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349483
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1520 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FLEISHER, GORDON, , ,		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 6520 PLATT AVE #652		Transaction ID : SA11A.358208
City WEST HILLS	State CA	Zip Code 91307-3218
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FLEISHER, GORDON, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016
Mailing Address 6520 PLATT AVE #652		Transaction ID : SA11A.391228
City WEST HILLS	State CA	Zip Code 91307-3218
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FLEISHER, GORDON, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016
Mailing Address 6520 PLATT AVE #652		Transaction ID : SA11A.391230
City WEST HILLS	State CA	Zip Code 91307-3218
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 332.00	

SUBTOTAL of Receipts This Page (optional).....▶	82.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1521 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLEISHER, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6520 PLATT AVE #652

City WEST HILLS	State CA	Zip Code 91307-3218
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403523

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FLEISHER, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6520 PLATT AVE #652

City WEST HILLS	State CA	Zip Code 91307-3218
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413756

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FLEISHMAN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3300 NATIONAL CITY TOWER

City LOUISVILLE	State KY	Zip Code 40202-3119
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BINGHAM GREENEBAUM DOLL	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391679

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1522 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLEMENBAUM, ABRAHAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15951 SW 9TH ST
 City PEMBROKE PINES State FL Zip Code 33027-5049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PSYCHIATRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 06 / 2016
Transaction ID : SA11A.363325
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FLEMING, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12510 48TH AVENUE NORTH
 City PLYMOUTH State MN Zip Code 55442-2007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPRESS SCRIPTS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381476
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FLEMING, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12510 48TH AVENUE NORTH
 City PLYMOUTH State MN Zip Code 55442-2007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPRESS SCRIPTS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422123
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1523 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLEMING, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12510 48TH AVENUE NORTH
 City PLYMOUTH State MN Zip Code 55442-2007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPRESS SCRIPTS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422125
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FLEMING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345, BECCA TEAL PLACE
 City ROUND ROCK State TX Zip Code 78681-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRIOT REAL ESTATE SOLUTION Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378874
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FLEMING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345, BECCA TEAL PLACE
 City ROUND ROCK State TX Zip Code 78681-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRIOT REAL ESTATE SOLUTION Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378875
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1524 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLEMING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345, BECCA TEAL PLACE
 City ROUND ROCK State TX Zip Code 78681-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRIOT REAL ESTATE SOLUTION Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404357
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. FLEMING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345, BECCA TEAL PLACE
 City ROUND ROCK State TX Zip Code 78681-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRIOT REAL ESTATE SOLUTION Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404358
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. FLEMING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345, BECCA TEAL PLACE
 City ROUND ROCK State TX Zip Code 78681-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRIOT REAL ESTATE SOLUTION Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409731
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1525 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLEMING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345, BECCA TEAL PLACE
 City ROUND ROCK State TX Zip Code 78681-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRIOT REAL ESTATE SOLUTION Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409741
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FLEMING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345, BECCA TEAL PLACE
 City ROUND ROCK State TX Zip Code 78681-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRIOT REAL ESTATE SOLUTION Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409744
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FLINN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 WASHINGTON AVE
 City WILMETTE State IL Zip Code 60091-2370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCM GROSVENOR Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416230
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1526 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOOD, CARL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11695 OKEEFE CREEK BOULEVARD
 City MISSOULA State MT Zip Code 59808-8596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378439
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FLORSCHUETZ, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 E SOUTHERN AVE UNIT C234
 City TEMPE State AZ Zip Code 85282-7809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373323
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

C. FLORSCHUETZ, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 E SOUTHERN AVE UNIT C234
 City TEMPE State AZ Zip Code 85282-7809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397936
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1527 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FLORSCHUETZ, LEON, , ,

Mailing Address **2625 E SOUTHERN AVE UNIT C234**

City TEMPE	State AZ	Zip Code 85282-7809
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.409913

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FLOURNOY, JOHN, F., MR.,

Mailing Address **900 BROOKSTONE CENTER PARKWAY**

City COLUMBUS	State GA	Zip Code 31904-2987
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLOURNOY DEVELOPMENT CO.	Occupation (for Individual) OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.409903

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FLOWER, LUDLOW, , ,

Mailing Address **157 BLACKBERRY HILL RD.**

City ORFORD	State NH	Zip Code 03777-4223
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt
07 / 30 / 2016

Transaction ID : SA11A.359849

Amount of Each Receipt this Period
131.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	731.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1528 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOWER, LUDLOW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 BLACKBERRY HILL RD.
 City ORFORD State NH Zip Code 03777-4223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 524.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384806
 Amount of Each Receipt this Period
 131.00
 Memo Item CONTRIBUTION

B. FLOWER, LUDLOW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 BLACKBERRY HILL RD.
 City ORFORD State NH Zip Code 03777-4223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 524.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419624
 Amount of Each Receipt this Period
 131.00
 Memo Item CONTRIBUTION

C. FLOYD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31423 HEATHERSTONE DR
 City WESLEY CHAPEL State FL Zip Code 33543-6877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 07 / 16 / 2016
Transaction ID : SA11A.349060
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	312.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1529 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOYD, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31423 HEATHERSTONE DR

City WESLEY CHAPEL	State FL	Zip Code 33543-6877
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.349754

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. FLOYD, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31423 HEATHERSTONE DR

City WESLEY CHAPEL	State FL	Zip Code 33543-6877
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359564

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. FLOYD, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31423 HEATHERSTONE DR

City WESLEY CHAPEL	State FL	Zip Code 33543-6877
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.400320

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1530 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOYD, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31423 HEATHERSTONE DR

City WESLEY CHAPEL	State FL	Zip Code 33543-6877
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422578

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FLOYD, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31423 HEATHERSTONE DR

City WESLEY CHAPEL	State FL	Zip Code 33543-6877
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422582

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. FLOYD, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31423 HEATHERSTONE DR

City WESLEY CHAPEL	State FL	Zip Code 33543-6877
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422583

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1531 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOYD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 SHADY LANE
 City BARTLETT State IL Zip Code 60103-4532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMURAI INVESTMENTS LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350009
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. FLUNKER, BRUCE, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7005 W LAFAYETTE PLACE
 City MEQUON State WI Zip Code 53092-1571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBSO, INC. Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350850
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. FLUNKER, BRUCE, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7005 W LAFAYETTE PLACE
 City MEQUON State WI Zip Code 53092-1571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBSO, INC. Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374650
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1532 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLUNKER, BRUCE, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7005 W LAFAYETTE PLACE
 City MEQUON State WI Zip Code 53092-1571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EBSO, INC. Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399716
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FLUNO, JERE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 ROYAL MARCO WAY, UNIT 730
 City MARCO ISLAND State FL Zip Code 34145-7802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362869
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. FOEHR, MATTHEW, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 DEVONSHIRE LOOP
 City BRENTWOOD State CA Zip Code 94513-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.351834
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1533 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOEHR, MATTHEW, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 DEVONSHIRE LOOP
 City BRENTWOOD State CA Zip Code 94513-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376922
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. FOEHR, MATTHEW, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 DEVONSHIRE LOOP
 City BRENTWOOD State CA Zip Code 94513-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406627
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354695
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1534 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359711
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372405
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.377431
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1535 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386883
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399839
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405121
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1536 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOERSTER, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 WILLOWBEND ST
 City HUNTSVILLE State TX Zip Code 77320-3423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419576
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FOGG, PHILLIP, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4560 SE INTERNATIONAL WAY STE. 100
 City MILWAUKIE State OR Zip Code 97222-4628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARQUIS COMPANIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381560
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. FOGG, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3447 BARRINGTON DR
 City WEST LINN State OR Zip Code 97068-3642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARQUIS COMPANIES Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381566
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30025.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1537 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOLEY, ROBERT, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 SOUTH FLAGLER DRIVE #1401
 City WEST PALM BEACH State FL Zip Code 33401-6711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417362
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FOLGER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 WINNERS CIR
 City RED LION State PA Zip Code 17356-8798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 410.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359122
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FOLGER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 WINNERS CIR
 City RED LION State PA Zip Code 17356-8798
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 410.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386905
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1538 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOLGER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 273 WINNERS CIR

City RED LION	State PA	Zip Code 17356-8798
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413967

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. FOLGER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 273 WINNERS CIR

City RED LION	State PA	Zip Code 17356-8798
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413980

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. FOLGER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 273 WINNERS CIR

City RED LION	State PA	Zip Code 17356-8798
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419641

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1539 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOLLETT, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 KIRKLAND VILLAGE CIRCLE

City BETHLEHEM	State PA	Zip Code 18017-4753
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411767

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. FOLSOM, ROGER, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 SEAFOAM AVENUE

City MONTEREY	State CA	Zip Code 93940-3410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.365940

Amount of Each Receipt this Period
1400.00

Memo Item
CONTRIBUTION

C. FOLSOM, ROGER, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 SEAFOAM AVENUE

City MONTEREY	State CA	Zip Code 93940-3410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.378518

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1540 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FONK, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 SCHOEN RD
 City UNION GROVE State WI Zip Code 53182-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394334
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FONK, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 SCHOEN RD
 City UNION GROVE State WI Zip Code 53182-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420458
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FONK, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 SCHOEN RD
 City UNION GROVE State WI Zip Code 53182-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420460
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1541 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FONTEYNE, PAUL, , ,

Mailing Address **4 DEEPWOOD LANE**

City **WESTPORT** State **CT** Zip Code **06880-1317**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **BOEHRINGER INGELHEIM** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 05 / 2016
Transaction ID : SA11A.362857

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FORD, ALLYN, C., ,

Mailing Address **PO BOX 1088**

City **ROSEBURG** State **OR** Zip Code **97470-0252**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ROSEBURG FOREST PRODUCTS** Occupation (for Individual) **BUSINESS MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.367894

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FORD, ALLEN, H., ,

Mailing Address **1890 E 107TH STREET, APT 905**

City **CLEVELAND** State **OH** Zip Code **44106-2252**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 20 / 2016
Transaction ID : SA11A.348101

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **12000.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1542 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 HUNTERS RIDGE CT
 City HOUSTON State TX Zip Code 77024-7634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYNTHIA ANN-SCHINDLER FORD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1449.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353407
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FORD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 HUNTERS RIDGE CT
 City HOUSTON State TX Zip Code 77024-7634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYNTHIA ANN-SCHINDLER FORD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1449.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382210
 Amount of Each Receipt this Period 999.00
 Memo Item CONTRIBUTION

C. FORD, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 HUNTERS RIDGE CT
 City HOUSTON State TX Zip Code 77024-7634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYNTHIA ANN-SCHINDLER FORD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1449.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410776
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1349.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1543 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4 HUNTERS RIDGE CT

City HOUSTON	State TX	Zip Code 77024-7634
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CYNTHIA ANN-SCHINDLER FORD	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1449.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410780

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FORD, DICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16 DOVERTON DRIVE

City GREENWICH	State CT	Zip Code 06831-3318
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359426

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FORD, DICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16 DOVERTON DRIVE

City GREENWICH	State CT	Zip Code 06831-3318
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386708

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1544 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386711
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FORD, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 DOVERTON DRIVE
 City GREENWICH State CT Zip Code 06831-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419447
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1545 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 LA LITA LANE
 City SANTA BARBARA State CA Zip Code 93105-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382198
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FORD, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 LA LITA LANE
 City SANTA BARBARA State CA Zip Code 93105-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396248
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FORD, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 LA LITA LANE
 City SANTA BARBARA State CA Zip Code 93105-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408266
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1546 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 LA LITA LANE
 City SANTA BARBARA State CA Zip Code 93105-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415517
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FORD, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 LA LITA LANE
 City SANTA BARBARA State CA Zip Code 93105-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415532
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FORD, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 LA LITA LANE
 City SANTA BARBARA State CA Zip Code 93105-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415533
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1547 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, ELDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19 LA LITA LANE

City SANTA BARBARA	State CA	Zip Code 93105-1916
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.416080

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FORD, JOHN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2250 HEARST WILLITS ROAD

City WILLITS	State CA	Zip Code 95490-8705
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369259

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. FORD, JOHN, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2250 HEARST WILLITS ROAD

City WILLITS	State CA	Zip Code 95490-8705
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.376766

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1548 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FORD, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3323 W CONSTITUTION DR.
 City CHANDLER State AZ Zip Code 85226-7603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPRESS SCRIPTS HOLDING COMPANY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353318
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FOSSI, LAWRENCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 WEST 62ND STREET APT. 22G
 City NEW YORK State NY Zip Code 10023-7532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAHR ENTERPRISES LLC Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372277
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FOSTER, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 KNIGHTSBRIDGE ROAD
 City MIDDLETOWN State DE Zip Code 19709-9706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387686
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1549 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358231
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358232
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378810
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1550 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382442
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.388900
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394574
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1551 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOTI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 BUCKHORN ROAD
 City ROANOKE State VA Zip Code 24018-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408528
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406251
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406253
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1552 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406259
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406260
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406261
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1553 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406262
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406266
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406267
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1554 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOULKES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 CLIFF DRIVE
 City BELTON State TX Zip Code 76513-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTVHCS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414123
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. FOURNIER, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 RANDALL ROAD
 City LEWISTON State ME Zip Code 04240-1735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALION SCIENCE AND TECHNOLOGY Occupation (for Individual) MARINE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 09 / 2016
Transaction ID : SA11A.346698
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FOURNIER, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 RANDALL ROAD
 City LEWISTON State ME Zip Code 04240-1735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALION SCIENCE AND TECHNOLOGY Occupation (for Individual) MARINE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363914
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1555 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOURNIER, TIMOTHY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 WARREN AVE
 City ROCHESTER State NY Zip Code 14618-4319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONIFER REALTY LLC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385242
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FOWLER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 PRINCE ABERT STREET SE
 City KENTWOOD State MI Zip Code 49548-7648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED STATES POSTAL SERVICE Occupation (for Individual) MAIL HANDLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369254
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. FOWLER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15017 MILL SWAMP RD
 City SMITHFIELD State VA Zip Code 23430-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407470
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1556 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FOWLER, RAYMOND, , ,

Mailing Address 15017 MILL SWAMP RD

City SMITHFIELD State VA Zip Code 23430-3101

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407478

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FOWLER, RAYMOND, , ,

Mailing Address 15017 MILL SWAMP RD

City SMITHFIELD State VA Zip Code 23430-3101

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407480

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FOWLER, SAM, , ,

Mailing Address 2001 WATERWAY BLVD

City ISLE OF PALMS State SC Zip Code 29451-2359

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOWLER HOSPITALITY Occupation (for Individual) HOSPITALITY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378909

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1557 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOWLIE, WENDY, L., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4413 COMMONWEALTH AVE

City LA CANADA FLINTRID	State CA	Zip Code 91011-3332
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408253

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. FOX, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3950 N LAKE SHORE DRIVE

City CHICAGO	State IL	Zip Code 60613-3400
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.396207

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. FOX, MARY, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 BURR RIDGE CLUB DRIVE

City BURR RIDGE	State IL	Zip Code 60527-5254
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

Transaction ID : SA11A.364214

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1558 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOX, MARY, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 BURR RIDGE CLUB DRIVE

City BURR RIDGE	State IL	Zip Code 60527-5254
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414679

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FOX, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47 THE COMMON

City BUFFALO	State NY	Zip Code 14221-5818
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONAX TECHNOLOGIES	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379408

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. FOX, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2925 SPORTSMANS DRIVE

City MILFORD	State IA	Zip Code 51351-9602
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WOLFE EYE CLINIC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.370783

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1559 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FOX, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2925 SPORTSMANS DRIVE
 City MILFORD State IA Zip Code 51351-9602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOLFE EYE CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399366
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FOX, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 LOCUST HILL
 City FRANKFORT State KY Zip Code 40601-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355240
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FOYT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2528 ASPEN COVE DRIVE
 City VESTAVIA State AL Zip Code 35243-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346107
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1560 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAHM, DONALD, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 AVENUE DE LA MER
APT 1006

City PALM COAST State FL Zip Code 32137-1208

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2016

Transaction ID : SA11A.358630

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. FRAIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1320 SEMINOLE

City FT LAUDERDALE State FL Zip Code 33304-1608

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRAIN INDUSTRIES Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2016

Transaction ID : SA11A.400064

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. FRAKER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6327 MIMOSA LANE

City DALLAS State TX Zip Code 75230-5134

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBRE Occupation (for Individual) MANAGING DIRECTOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.350457

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1561 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAKER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6327 MIMOSA LANE

City DALLAS	State TX	Zip Code 75230-5134
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBRE	Occupation (for Individual) MANAGING DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2016

Transaction ID : SA11A.376102

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. FRAKER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6327 MIMOSA LANE

City DALLAS	State TX	Zip Code 75230-5134
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBRE	Occupation (for Individual) MANAGING DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400846

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. FRANCISCO, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2210 AVALON PLACE

City HOUSTON	State TX	Zip Code 77019-6408
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.347741

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1562 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANCO, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8107 GREELEY BOULEVARD
 City SPRINGFIELD State VA Zip Code 22152-3041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SM&A Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392489
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. FRANCIS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4000 NE 145TH STREET
 City SEATTLE State WA Zip Code 98155-7619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.362800
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350399
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1563 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359655
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370516
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408589
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1564 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANCE, SHERROD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 607
 City RAWLINS State WY Zip Code 82301-0607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412976
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FRANCIS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 BERKLEY LN
 City ASHEBORO State NC Zip Code 27205-4166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN AIRLINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386615
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. FRANCIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 TURTLE BEACH LANE
 City JOHNS ISLAND State SC Zip Code 29455-5453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378278
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1565 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANKS, ALAN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3045 MARINA BAY
 2203
 City LEAGUE CITY State TX Zip Code 77573-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRAZY ALAN'S SWAMP SHACK Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1235.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351936
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

B. FRANKS, ALAN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3045 MARINA BAY
 2203
 City LEAGUE CITY State TX Zip Code 77573-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRAZY ALAN'S SWAMP SHACK Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1235.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356311
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

C. FRANKS, ALAN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3045 MARINA BAY
 2203
 City LEAGUE CITY State TX Zip Code 77573-2754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRAZY ALAN'S SWAMP SHACK Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1235.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383042
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 741.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1566 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANKS, ALAN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3045 MARINA BAY
2203

City LEAGUE CITY State TX Zip Code 77573-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CRAZY ALAN'S SWAMP SHACK Occupation (for Individual) RESTAURANT OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1235.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.411257

Amount of Each Receipt this Period
247.00

Memo Item CONTRIBUTION

B. FRANK, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 HILLTOP ROAD

City NORWALK State CT Zip Code 06854-5002

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372209

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FRANK, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 HILLTOP ROAD

City NORWALK State CT Zip Code 06854-5002

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.387323

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	447.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1567 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HILLTOP ROAD
 City NORWALK State CT Zip Code 06854-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387328
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FRANK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HILLTOP ROAD
 City NORWALK State CT Zip Code 06854-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405744
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FRANK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HILLTOP ROAD
 City NORWALK State CT Zip Code 06854-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405764
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1568 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANK, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY #403
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEMCO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401047
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. FRANKLIN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 CENTRAL PARK WEST 19B
 City NEW YORK State NY Zip Code 10024-3015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410620
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRANKLIN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 CENTRAL PARK WEST 19B
 City NEW YORK State NY Zip Code 10024-3015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410648
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1569 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANKLIN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 CENTRAL PARK WEST
 19B
 City NEW YORK State NY Zip Code 10024-3015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410651
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FRANKLIN, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2171 TAYSIDE XING
 City KENNESAW State GA Zip Code 30152-8269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364122
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. FRANKLIN, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2171 TAYSIDE XING
 City KENNESAW State GA Zip Code 30152-8269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390409
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1570 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANKLIN, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2171 TAYSIDE XING

City KENNESAW	State GA	Zip Code 30152-8269
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390410

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FRANKLIN, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1056 5TH AVENUE, APT 7-C

City NEW YORK	State NY	Zip Code 10028-0112
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.390772

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. FRANK, MARGIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6429 PENBERTON DR

City DALLAS	State TX	Zip Code 75230-4126
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380238

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1571 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANK, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 56
 City HARRISON State ME Zip Code 04040-0056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361463
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FRANKS, NANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 S WEBSTER STREET
 City HARRISBURG State IL Zip Code 62946-2841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393837
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. FRANKLIN, OLIVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3510 TURTLE CREEK BLVD 16F
 City DALLAS State TX Zip Code 75219-5546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.384951
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1572 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANKLIN, OLIVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3510 TURTLE CREEK BLVD
 16F
 City DALLAS State TX Zip Code 75219-5546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409424
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352421
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358281
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1573 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376296
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376297
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382475
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1574 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANSSON, MARTHA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DODGE DRIVE
 City WEST HARTFORD State CT Zip Code 06107-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416147
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. FRANTZ, L. SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 MEADOW RD
 City RIVERSIDE State CT Zip Code 06878-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONNECTICUT SENATE Occupation (for Individual) STATE SENATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401044
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. FRANZIA, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 789
 City CERES State CA Zip Code 95307-0789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F J VENTURE Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397534
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10550.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1575 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356378
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357475
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382777
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1576 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.413124
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.418826
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. FRANZ, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 CANDLEWOOD DRIVE
 City PITTSBURGH State PA Zip Code 15241-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.418840
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1577 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357280
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357281
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382685
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1578 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403451
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403455
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FRAZIER, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46A ANCHOR DRIVE
 City KEY LARGO State FL Zip Code 33037-5283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413061
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1579 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAZIER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 604
 City DANVILLE State AR Zip Code 72833-0604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RURAL TELCOM SOLUTIONS, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398526
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. FRECHE, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7861 LINDEN COURT
 City NAPLES State FL Zip Code 34113-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351983
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FRECHE, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7861 LINDEN COURT
 City NAPLES State FL Zip Code 34113-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378777
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1580 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRECHE, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7861 LINDEN COURT
 City NAPLES State FL Zip Code 34113-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390234
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FRECHE, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7861 LINDEN COURT
 City NAPLES State FL Zip Code 34113-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398889
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FRECHE, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7861 LINDEN COURT
 City NAPLES State FL Zip Code 34113-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399298
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1581 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRECHE, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7861 LINDEN COURT
 City NAPLES State FL Zip Code 34113-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412027
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FRECHE, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7861 LINDEN COURT
 City NAPLES State FL Zip Code 34113-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415285
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FREDRICKSON, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1219 S 194TH ST
 City OMAHA State NE Zip Code 68130-3767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIGNATURE PERFORMANCE Occupation (for Individual) PRESIDENT/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402558
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1582 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREEDMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10483 E GOOSE HAVEN DR
 City LAFAYETTE State CO Zip Code 80026-9700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALL AEROSPACE Occupation (for Individual) AEROSPACE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402396
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. FREEDMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10483 E GOOSE HAVEN DR
 City LAFAYETTE State CO Zip Code 80026-9700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALL AEROSPACE Occupation (for Individual) AEROSPACE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402398
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. FREEDMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10483 E GOOSE HAVEN DR
 City LAFAYETTE State CO Zip Code 80026-9700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALL AEROSPACE Occupation (for Individual) AEROSPACE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415969
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1583 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREEMAN, F., K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1012
 City BELLEVUE State WA Zip Code 98009-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421197
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

B. FREEMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 SOUTH BEACH DRIVE
 City SAINT AUGUSTINE State FL Zip Code 32084-0458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398139
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. FREEMAN, KENT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 COPE RIDGE COURT
 City ROSEVILLE State CA Zip Code 95747-8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESCUE INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.361143
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1584 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREEMAN, KENT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 COPE RIDGE COURT
 City ROSEVILLE State CA Zip Code 95747-8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESCUE INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376964
 Amount of Each Receipt this Period 35.00
 Memo Item
 CONTRIBUTION

B. FREEMAN, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 MCDANIEL COURT
 City GREENVILLE State SC Zip Code 29605-1711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361513
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

C. FREEMAN, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 MCDANIEL COURT
 City GREENVILLE State SC Zip Code 29605-1711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392988
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	485.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1585 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREEMAN, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1615 BAY CLIFF CIRCLE
 City CORONA DEL MAR State CA Zip Code 92625-1232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348124
 Amount of Each Receipt this Period -250.00
 Memo Item
 CONTRIBUTION
 CHARGED BACK

B. FREEMAN, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1615 BAY CLIFF CIRCLE
 City CORONA DEL MAR State CA Zip Code 92625-1232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348148
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

C. FREEMAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 PATTEN ROAD
 City HIGHLAND PARK State IL Zip Code 60035-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374375
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1586 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRELINGHUYSEN, J S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7106 SE GOLF RIDGE WAY
 City HOBE SOUND State FL Zip Code 33455-8046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412242
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FRENCH, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11655 LEESBOROUGH CIR
 City SILVER SPRING State MD Zip Code 20902-2890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408561
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. FRENCH, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11655 LEESBOROUGH CIR
 City SILVER SPRING State MD Zip Code 20902-2890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408562
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1587 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRENCH, DALE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7807 LONG POINT ROAD
 STE 210
 City HOUSTON State TX Zip Code 77055-3694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.353036
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. FRENCH, DALE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7807 LONG POINT ROAD
 STE 210
 City HOUSTON State TX Zip Code 77055-3694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389439
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. FRENCH, ELISABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2122 MASSACHUSETTS AVENUE NW
 APT 312
 City WASHINGTON State DC Zip Code 20008-2827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381219
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1588 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRENCH, JAMES, S.M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3220 E BRIARCLIFF ROAD
 City BIRMINGHAM State AL Zip Code 35223-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNN INVESTMENT COMPANY Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364267
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FRENCH, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 OCEAN DRIVE 802
 City JUNO BEACH State FL Zip Code 33408-1952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349266
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FRENCH, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 OCEAN DRIVE 802
 City JUNO BEACH State FL Zip Code 33408-1952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.360189
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1589 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRENCH, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 OCEAN DRIVE
 802
 City JUNO BEACH State FL Zip Code 33408-1952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.385690
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. FRENCH, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 OCEAN DRIVE
 802
 City JUNO BEACH State FL Zip Code 33408-1952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 09 / 21 / 2016
Transaction ID : SA11A.401161
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. FRENCH, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 OCEAN DRIVE
 802
 City JUNO BEACH State FL Zip Code 33408-1952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.409965
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1590 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRENCH, TIM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 140 NOYA TRACE
City LOUDON State TN Zip Code 37774-6918
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364367
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FRERES, DEANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 706 E PINE ST
City STAYTON State OR Zip Code 97383-1353
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367942
Amount of Each Receipt this Period 1250.00
 Memo Item CONTRIBUTION

C. FRERES, ROBERT, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 276
City LYONS State OR Zip Code 97358-0276
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FRERES LUMBER COMPANY INC. Occupation (for Individual) LUMBERMAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367941
Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1591 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRERES, TED, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 451
 City STAYTON State OR Zip Code 97383-0451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRERES LUMBER Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1250.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.367873
 Amount of Each Receipt this Period **1250.00**
 Memo Item CONTRIBUTION

B. FRERICH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1498 CAMERON LANE
 City WICHITA FALLS State TX Zip Code 76305-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEALED AIR CORP Occupation (for Individual) ELECTRONICS CRAFTSMAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 375.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354536
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

C. FRERICH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1498 CAMERON LANE
 City WICHITA FALLS State TX Zip Code 76305-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEALED AIR CORP Occupation (for Individual) ELECTRONICS CRAFTSMAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 375.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358970
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1350.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1592 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRERICH, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1498 CAMERON LANE

City WICHITA FALLS	State TX	Zip Code 76305-7201
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SEALEDAIR CORP	Occupation (for Individual) ELECTRONICS CRAFTSMAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358971

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. FRERICH, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1498 CAMERON LANE

City WICHITA FALLS	State TX	Zip Code 76305-7201
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SEALEDAIR CORP	Occupation (for Individual) ELECTRONICS CRAFTSMAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365888

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FRERICH, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1498 CAMERON LANE

City WICHITA FALLS	State TX	Zip Code 76305-7201
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SEALEDAIR CORP	Occupation (for Individual) ELECTRONICS CRAFTSMAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369926

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1593 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRERICH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1498 CAMERON LANE
 City WICHITA FALLS State TX Zip Code 76305-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEALEDAIR CORP Occupation (for Individual) ELECTRONICS CRAFTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380012
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FRERICH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1498 CAMERON LANE
 City WICHITA FALLS State TX Zip Code 76305-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEALEDAIR CORP Occupation (for Individual) ELECTRONICS CRAFTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408709
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FREY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 FERGUSON ROAD
 City INDIANAPOLIS State IN Zip Code 46239-7825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400939
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1594 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 FERGUSON ROAD
 City INDIANAPOLIS State IN Zip Code 46239-7825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422603
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FREY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4829 FERGUSON ROAD
 City INDIANAPOLIS State IN Zip Code 46239-7825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422609
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FREY, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5329 GREEN VALLEY DR
 City CLARENCE State NY Zip Code 14031-1232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FREY ELECTRIC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385233
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1595 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREYER, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3033 E 1ST AVE STE 600
 City DENVER State CO Zip Code 80206-5620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAND TITLE GUARANTEE CO. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.398481
 Amount of Each Receipt this Period
 10000.00
 Memo Item CONTRIBUTION

B. FRICK, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 SUNSET RD
 City OYSTER BAY State NY Zip Code 11771-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411971
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. FRICK, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 SUNSET RD
 City OYSTER BAY State NY Zip Code 11771-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411978
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1596 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIDIRIC, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4650 SOMERSET COURT
 City BROOKFIELD State WI Zip Code 53045-8156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391828
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FRIDIRIC, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4650 SOMERSET COURT
 City BROOKFIELD State WI Zip Code 53045-8156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391829
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FRIEDBERG, BARRY, S., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 E 71ST STREET
 City NEW YORK State NY Zip Code 10021-5011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRIEDBERG FERN Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390813
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1597 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43503 BUTLER PLACE
 City LEESBURG State VA Zip Code 20176-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415882
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FRIEDMAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43503 BUTLER PLACE
 City LEESBURG State VA Zip Code 20176-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415884
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FRIEDEN, JEFFREY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 SHORE CLIFF RD
 City CORONA DEL MAR State CA Zip Code 92625-2657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEN-X Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 55000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358520
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1598 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, JOSHUA, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 248 S MAPLETON DR

City LOS ANGELES	State CA	Zip Code 90024-1805
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CANYON CAPITAL	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.381571

Amount of Each Receipt this Period
35000.00

Memo Item
CONTRIBUTION

B. FRIEDRICH, REINY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 619 EAST LINCOLN WAY

City AMES	State IA	Zip Code 50010-6520
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.366996

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. FRIEDRICH, REINY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 619 EAST LINCOLN WAY

City AMES	State IA	Zip Code 50010-6520
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368428

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1599 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FRIEDRICH, REINY, , ,

Mailing Address **619 EAST LINCOLN WAY**

City **AMES** State **IA** Zip Code **50010-6520**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
09 / 21 / 2016
Transaction ID : SA11A.401247

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FRIEDRICH, REINY, , ,

Mailing Address **619 EAST LINCOLN WAY**

City **AMES** State **IA** Zip Code **50010-6520**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
09 / 21 / 2016
Transaction ID : SA11A.401249

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FRIEDGEN, ROBERT, , ,

Mailing Address **17696 FONTICELLO WAY**

City **SAN DIEGO** State **CA** Zip Code **92128-1816**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt
08 / 04 / 2016
Transaction ID : SA11A.363130

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1600 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDGEN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17696 FONTICELLO WAY

City SAN DIEGO	State CA	Zip Code 92128-1816
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2016

Transaction ID : SA11A.404388

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. FRIEDMAN, ROBERT, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MAUCHLY

City IRVINE	State CA	Zip Code 92618-2305
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEN-X	Occupation (for Individual) VICE CHAIRMAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55000.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.367875

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

C. FRIEL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 SARATOGA AVE.
APT 315

City SANTA CLARA	State CA	Zip Code 95051-7318
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372321

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1601 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEND, MATTHEW, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 SW GREENLEAF DR
 City PORTLAND State OR Zip Code 97221-3229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.361545
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. FRIESEN, GEORGE, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 LUKES WOOD ROAD
 City NEW CANAAN State CT Zip Code 06840-2204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407922
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FRIESEN, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3159 ELLA
 City MANHATTAN State KS Zip Code 66502-2012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLY FRIESEN Occupation (for Individual) DRAWING INSTRUCTOR/HOMEMAKE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383803
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1602 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FRIESEN, HOLLY, , ,		Date of Receipt
Mailing Address 3159 ELLA		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City MANHATTAN	State KS	Zip Code 66502-2012
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.402419
Name of Employer (for Individual) HOLLY FRIESEN		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) DRAWING INSTRUCTOR/HOMEMAKE		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FRIESEN, HOLLY, , ,		Date of Receipt
Mailing Address 3159 ELLA		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City MANHATTAN	State KS	Zip Code 66502-2012
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.402425
Name of Employer (for Individual) HOLLY FRIESEN		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) DRAWING INSTRUCTOR/HOMEMAKI		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FRIESTAD, LARRY, , ,		Date of Receipt
Mailing Address 1528 LANGHAM TERRACE		<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2016"/>
City LAKE MARY	State FL	Zip Code 32746-1971
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.346967
Name of Employer (for Individual) FLORIDA ENERGY PHYSICANS		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) PHYSICIAN		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1150.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1603 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIESS, LYNNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9790
 City JACKSON State WY Zip Code 83002-9790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391359
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. FRIST, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 ENSWORTH AVE
 City NASHVILLE State TN Zip Code 37205-2002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.379033
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. FRITSCH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2644 PASADENA BLVD
 City WUWATOSA State WI Zip Code 53226-1950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAL LEONARD CORP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380608
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1604 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIZE, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 S ELDORADO LN

City ANAHEIM	State CA	Zip Code 92807-3513
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRIZE	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358350

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FRIZE, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 S ELDORADO LN

City ANAHEIM	State CA	Zip Code 92807-3513
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRIZE	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382482

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FROESCHL, PHILLIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2606 MCLEAN STREET

City FALLS CITY	State NE	Zip Code 68355-1209
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.394613

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:		PAGE 1605 OF 5722	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FROH, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 CHERRY LANE
 224
 City NORTHBROOK State IL Zip Code 60062-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAPLES LASH BAR Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356275
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. FROH, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 CHERRY LANE
 224
 City NORTHBROOK State IL Zip Code 60062-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAPLES LASH BAR Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362247
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. FROH, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 CHERRY LANE
 224
 City NORTHBROOK State IL Zip Code 60062-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAPLES LASH BAR Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383072
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

225.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1606 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FROST, HOLLOWAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 27500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421187
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. FROST, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 N. BABCOCK DRIVE
 City PALATINE State IL Zip Code 60074-5561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RALPH H. SIMPSON CO. Occupation (for Individual) CONSTRUCTION MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390955
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349811
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1607 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349812
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349813
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357171
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

125.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1608 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358261
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384370
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384372
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1609 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384377
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397849
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FRUSHON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 OTTER MILL WAY
 City SUN CITY CENTER State FL Zip Code 33573-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419169
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1610 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRY, DARRYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2375 ROCKWOOD RANCH ROAD

City MORGAN HILL	State CA	Zip Code 95037-8921
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US HOME OWNERSHIP, LLC	Occupation (for Individual) INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397778

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FRY, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3745 MARKHAM WAY SE

City ATLANTA	State GA	Zip Code 30339-4255
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.347647

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. FRY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2005 KITTRIDGE AVE

City COLORADO SPRINGS	State CO	Zip Code 80919-3889
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BROADCOM LTD	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408456

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1611 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUCHS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 946
 City POINT CLEAR State AL Zip Code 36564-0946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2016
Transaction ID : SA11A.347039
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FUCHS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 946
 City POINT CLEAR State AL Zip Code 36564-0946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.367007
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FUCHS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 946
 City POINT CLEAR State AL Zip Code 36564-0946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.393640
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1612 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344409
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347627
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349525
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1613 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349529
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359855
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372260
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1614 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382078
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384751
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399957
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1615 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUDGE, BETTY, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 KELLY DRIVE
 City VICTORIA State TX Zip Code 77904-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RADIO TOWER RENTAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419577
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD #143 143
 City GAINESVILLE State VA Zip Code 20155-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372311
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD #143 143
 City GAINESVILLE State VA Zip Code 20155-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384647
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1616 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD #143
 143
 City GAINESVILLE State VA Zip Code 20155-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384670
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD #143
 143
 City GAINESVILLE State VA Zip Code 20155-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399864
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD #143
 143
 City GAINESVILLE State VA Zip Code 20155-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400815
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1617 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD #143
 143
 City GAINESVILLE State VA Zip Code 20155-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410771
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. FUERST, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13550 HEATHCOTE BLVD #143
 143
 City GAINESVILLE State VA Zip Code 20155-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412662
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. FUITEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9240 NW GROVELAND RAOD
 City HILLSBORO State OR Zip Code 97124-9352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METRO WEST AMBULANCE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.360172
 Amount of Each Receipt this Period
 15000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1618 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULBRIGHT, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6235 BRISTOL PLACE

City FRISCO	State TX	Zip Code 75034-7253
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350528

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. FULBRIGHT, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6235 BRISTOL PLACE

City FRISCO	State TX	Zip Code 75034-7253
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384233

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. FULBRIGHT, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6235 BRISTOL PLACE

City FRISCO	State TX	Zip Code 75034-7253
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384246

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1619 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6198 LAWRENCE 2240
 City MONETT State MO Zip Code 65708-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348952
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. FULLMER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2552 WALNUT AVE. #230 SUITE 230
 City TUSTIN State CA Zip Code 92780-6983
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406344
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FULWEILER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 192 BRECKS LANE
 City WILMINGTON State DE Zip Code 19807-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.363251
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1620 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FULWEILER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 192 BRECKS LANE
 City WILMINGTON State DE Zip Code 19807-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383330
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FULWYLER, PATRICIA, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8882 W BEACHSIDE LANE
 City BOISE State ID Zip Code 83714-6713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346226
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FULWYLER, PATRICIA, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8882 W BEACHSIDE LANE
 City BOISE State ID Zip Code 83714-6713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377085
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1621 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUNDERBURK, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103-1 GENOES PT RD SW
 City SUPPLY State NC Zip Code 28462-3468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FUNDERBURK, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103-1 GENOES PT RD SW
 City SUPPLY State NC Zip Code 28462-3468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386319
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. FUNDERBURK, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103-1 GENOES PT RD SW
 City SUPPLY State NC Zip Code 28462-3468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390714
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1622 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUNDERBURK, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103-1 GENOES PT RD SW
 City SUPPLY State NC Zip Code 28462-3468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414279
 Amount of Each Receipt this Period 36.00
 Memo Item CONTRIBUTION

B. FUNK, RICHARD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 HARBOR VIEW LANE
 City BELLEAIR BLUFFS State FL Zip Code 33770-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360997
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. FUNK, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24729 HARBOUR VIEW DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-1509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408605
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 736.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1623 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. FUNK, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1830 COCONUT PALM CIRCLE
 City NORTH PORT State FL Zip Code 34288-8651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.363157
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344357
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.349993
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1624 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349997
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.359033
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364803
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	159.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1625 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381917
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FURBY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7610 HILLSIDE DR
 City LAJOLLA State CA Zip Code 92037-3942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387859
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. FURMAN, WILLIAM, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CENTREPOINT DR STE 200
 City LAKE OSWEGO State OR Zip Code 97035-8612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENBRIER COMPANIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360326
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2609.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1626 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FURRIER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4460 N VIA DE LA GRANJA

City TUCSON	State AZ	Zip Code 85718-7444
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 22 / 2016
Transaction ID : SA11A.374074

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. FUSSCAS, EVANGELINE, B., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 249 LINDEN STREET

City MANCHESTER	State NH	Zip Code 03104-3319
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.369298

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. FUSSCAS, EVANGELINE, B., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 249 LINDEN STREET

City MANCHESTER	State NH	Zip Code 03104-3319
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
605.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.369389

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1627 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FUSSCAS, EVANGELINE, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 249 LINDEN STREET
 City MANCHESTER State NH Zip Code 03104-3319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377071
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. FUSSCAS, EVANGELINE, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 249 LINDEN STREET
 City MANCHESTER State NH Zip Code 03104-3319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383269
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. FUSSCAS, EVANGELINE, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 249 LINDEN STREET
 City MANCHESTER State NH Zip Code 03104-3319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414487
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1628 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAAL, RACHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16835 WOODLEAF ROAD
 City STRONGSVILLE State OH Zip Code 44136-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLT TECHNICAL MANAGEMENT Occupation (for Individual) SOFTWARE APPLICATIONS CONSUL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408587
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350814
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CONT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350815
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1629 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CONT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365766
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365768
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GABRIEL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549-7459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEAM HENRY ENTERPRISES, LLC Occupation (for Individual) DIVISION MANAGER FEDERAL CONT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.393631
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1630 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GABRIEL, HARRY, W., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11614 RIVERWOOD RD

City PORTLAND	State OR	Zip Code 97219-8472
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GENERATIONS LLC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		30		2016

Transaction ID : SA11A.381554

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. GACIOCH, MICHAEL, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9231 FALLS RD

City WEST FALLS	State NY	Zip Code 14170-9606
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL PROPERTY MANAGEMENT ASSOCIATI	Occupation (for Individual) REAL ESTATE INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2016

Transaction ID : SA11A.385222

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. GACIOCH, WILLIAM, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7060 OLD LAKESHORE RD

City DERBY	State NY	Zip Code 14047-9767
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2016

Transaction ID : SA11A.383563

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1631 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAEDE, STEVEN, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 S. ROCKFORD ROAD
 City TULSA State OK Zip Code 74114-5324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSBI Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347964
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GAEDE, STEVEN, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2937 S. ROCKFORD ROAD
 City TULSA State OK Zip Code 74114-5324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSBI Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350544
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GAFFNEY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16823 CHESTERFIELD BLUFFS CIR
 City CHESTERFIELD State MO Zip Code 63005-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRODUCTION PRODUCTS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391607
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1632 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAILLE, SPENCER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1140 PAREDES LINE RD

City BROWNSVILLE	State TX	Zip Code 78521-2628
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411997

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. GAINSBORO, LLOYD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 HALE DRIVE

City DEDHAM	State MA	Zip Code 02026-5531
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEDHAM HEALTH AND ATHLETIC COMPLEX	Occupation (for Individual) NEW BUSINESS DEVELOPMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : SA11A.375779

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. GAINSBORO, LLOYD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 HALE DRIVE

City DEDHAM	State MA	Zip Code 02026-5531
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEDHAM HEALTH AND ATHLETIC COMPLEX	Occupation (for Individual) NEW BUSINESS DEVELOPMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.404221

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1633 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAITHER, JOHN, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 702 MEADOWMONT LANE
 City CHAPEL HILL State NC Zip Code 27517-8157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365194
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GALANIS, NANCY, M,, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11370 SUEMARTOM CT
 City MARILLA State NY Zip Code 14102-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383550
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. GALI, RAVI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 ROSETTE CT
 City SUNNYVALE State CA Zip Code 94086-8664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILEAF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372299
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1634 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALI, RAVI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 ROSETTE CT
 City SUNNYVALE State CA Zip Code 94086-8664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILEAF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384209
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GALI, RAVI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 ROSETTE CT
 City SUNNYVALE State CA Zip Code 94086-8664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILEAF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384218
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GALI, RAVI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 ROSETTE CT
 City SUNNYVALE State CA Zip Code 94086-8664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILEAF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384220
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1635 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALIHER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 669
 City DALEVILLE State IN Zip Code 47334-0669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AE BOYLE CO INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389079
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GALIHER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 669
 City DALEVILLE State IN Zip Code 47334-0669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AE BOYLE CO INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414778
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. GALLAGHER, BRIAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 FOWLER AVE.
 City PELHAM State NY Zip Code 10803-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362295
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1636 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLAGHER, CECILY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 W MORSE STREET
 City FREDERICKSBURG State TX Zip Code 78624-2652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351142
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GALLAGHER, CECILY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 W MORSE STREET
 City FREDERICKSBURG State TX Zip Code 78624-2652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 02 / 2016**
Transaction ID : SA11A.388909
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GALLAGHER, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1474 APPLGATE DRIVE
 City NAPERVILLE State IL Zip Code 60565-1226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE CORPORATION Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417597
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1637 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLAGHER, GREGORY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 OBRIEN ROAD
 City MARLBOROUGH State MA Zip Code 01752-2791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387627
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GALLAGHER, GREGORY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 OBRIEN ROAD
 City MARLBOROUGH State MA Zip Code 01752-2791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398589
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GALLAGHER, SHAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 JOHNSON PLACE
 City EVANSVILLE State IN Zip Code 47714-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358552
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1638 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLAND, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4218 VINTAGE CIRCLE
 City PROVO State UT Zip Code 84604-5693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370477
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GALLEGOS, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2374 ALEXANDER STREET
 City WOODLAND State CA Zip Code 95776-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCESS TRANSPORT & LOGISTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GALLEGOS, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2374 ALEXANDER STREET
 City WOODLAND State CA Zip Code 95776-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCESS TRANSPORT & LOGISTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356248
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1639 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLEGOS, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2374 ALEXANDER STREET
 City WOODLAND State CA Zip Code 95776-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCESS TRANSPORT & LOGISTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383064
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GALLEGOS, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2374 ALEXANDER STREET
 City WOODLAND State CA Zip Code 95776-5461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCESS TRANSPORT & LOGISTICS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411315
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GALLUP, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1782 CAPISTRANO AVENUE
 City BERKELEY State CA Zip Code 94707-1806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389845
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1640 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALOVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 S. PARAGON DRIVE
 City ST. GEORGE State UT Zip Code 84790-6146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350614
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GALOVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 S. PARAGON DRIVE
 City ST. GEORGE State UT Zip Code 84790-6146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374753
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GALOVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 S. PARAGON DRIVE
 City ST. GEORGE State UT Zip Code 84790-6146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386079
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1641 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALOVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 S. PARAGON DRIVE
 City ST. GEORGE State UT Zip Code 84790-6146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399666
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GALVIN, CHRISTOPHER, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 S WACKER DR
 City CHICAGO State IL Zip Code 60606-4637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRISON STREET Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421186
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. GAMBLE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 REBECCA ROAD
 City WOODSTOCK State AL Zip Code 35188-4364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354177
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1642 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAMBLE, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 175 HUGUENOT ST
PH501

City NEW ROCHELLE State NY Zip Code 10801-7767

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INS BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.402654

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. GAMBLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 145 TOWN CENTER #683

City CORTE MADERA State CA Zip Code 94925-1209

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2016

Transaction ID : SA11A.400040

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. GAMMANS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 87

City SOUTHERN PINES State NC Zip Code 28388-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.350148

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1325.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1643 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352385
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358259
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368925
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1644 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376160
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398660
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GAMMANS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 87
 City SOUTHERN PINES State NC Zip Code 28388-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCELE BIOPHARMA Occupation (for Individual) BIOTECHNOLOGY RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400836
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1645 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GANDY, RACHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 561 OLD FIELD RD.
 City MURRELLS INLET State SC Zip Code 29576-7748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE JACKSON COMPANIES Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.356425
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GANDY, RACHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 561 OLD FIELD RD.
 City MURRELLS INLET State SC Zip Code 29576-7748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE JACKSON COMPANIES Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380747
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GANGWERE, BLANCHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6940 EDGEVALE ROAD
 City KANSAS CITY State MO Zip Code 64113-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) COMPOSER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374244
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1646 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GANGWERE, BLANCHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6940 EDGEVALE ROAD
 City KANSAS CITY State MO Zip Code 64113-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NA Occupation (for Individual) COMPOSER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410300
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GANNON, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2310 14TH ST N #403
 City ARLINGTON State VA Zip Code 22201-5879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. DEPT OF JUSTICE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419825
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. GANSKI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3213 W MOJEAN ST
 City TUCSON State AZ Zip Code 85745-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354532
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1025.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1647 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GANSKI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3213 W MOJEAN ST

City TUCSON	State AZ	Zip Code 85745-1548
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359576

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GANSKI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3213 W MOJEAN ST

City TUCSON	State AZ	Zip Code 85745-1548
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359577

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GANSKI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3213 W MOJEAN ST

City TUCSON	State AZ	Zip Code 85745-1548
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380013

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1648 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GANSKI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3213 W MOJEAN ST
 City TUCSON State AZ Zip Code 85745-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408651
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GANSKI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3213 W MOJEAN ST
 City TUCSON State AZ Zip Code 85745-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418727
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GAO, FENG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SAINT CHRISTOPHER COURT
 City SUGAR LAND State TX Zip Code 77479-4204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362215
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1649 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAO, FENG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SAINT CHRISTOPHER COURT
 City SUGAR LAND State TX Zip Code 77479-4204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405193
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GAO, FENG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SAINT CHRISTOPHER COURT
 City SUGAR LAND State TX Zip Code 77479-4204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405194
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GARAGIOLA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7235 E PARADISE DRIVE
 City SCOTTSDALE State AZ Zip Code 85260-5433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAJOR LEAGUE BASKETBALL Occupation (for Individual) SR. VP
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361324
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1650 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GARARD, JAMES, L., MR., JR.

Mailing Address **5 PARK PLACE**

City **VILLAGE OF GOLF** State **FL** Zip Code **33436-5619**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.401100

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GARBER, ANN, R., ,

Mailing Address **200 E SOUTH ST**

City **CORYDON** State **IA** Zip Code **50060-1726**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
09 / 23 / 2016

Transaction ID : SA11A.406536

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GARCIA, ERIN, , ,

Mailing Address **1149 BELLVINE TRL**

City **EL CAJON** State **CA** Zip Code **92019-3278**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **DIVERSIFIED HOSPITALITY SOLUTIONS, LTD** Occupation (for Individual) **HOSPITALITY SUPPLY**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.382402

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **2955.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1651 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, GUILLERMO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9401 SW 103 STREET
 City MIAMI State FL Zip Code 33176-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARCIA, GUILLERMO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9401 SW 103 STREET
 City MIAMI State FL Zip Code 33176-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.359024
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GARCIA, GUILLERMO, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9401 SW 103 STREET
 City MIAMI State FL Zip Code 33176-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387873
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1652 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382134
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382146
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383873
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1653 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384265
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386418
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GARCIA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 E. 3RD ST
 City STOCKTON State CA Zip Code 95206-1640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396760
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1654 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 818 E. 3RD ST
City STOCKTON State CA Zip Code 95206-1640
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2016
Transaction ID : SA11A.396762
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 818 E. 3RD ST
City STOCKTON State CA Zip Code 95206-1640
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016
Transaction ID : SA11A.415574
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GARCIA, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 818 E. 3RD ST
City STOCKTON State CA Zip Code 95206-1640
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016
Transaction ID : SA11A.419524
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1655 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARCIA, SHEILAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 LAGUNA BOULEVARD SW
 City ALBUQUERQUE State NM Zip Code 87104-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARCIA HONDA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365422
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GARDNER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1572 GOODIN HOLLOW ROAD
 City NOEL State MO Zip Code 64854-7235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373585
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. GARDNER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1572 GOODIN HOLLOW ROAD
 City NOEL State MO Zip Code 64854-7235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.395077
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1656 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARDNER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1572 GOODIN HOLLOW ROAD
 City NOEL State MO Zip Code 64854-7235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.406510
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARDNER, GISELA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2323 MCDANIEL AVENUE APT 1133
 City EVANSTON State IL Zip Code 60201-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.356538
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GARDNER, GISELA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2323 MCDANIEL AVENUE APT 1133
 City EVANSTON State IL Zip Code 60201-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : SA11A.364213
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1657 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARDNER, GISELA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2323 MCDANIEL AVENUE
 APT 1133
 City EVANSTON State IL Zip Code 60201-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392737
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GARDNER, MICHAEL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 BERKLEY CIR
 City HINGHAM State MA Zip Code 02043-3354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION STREET MANAGEMENT, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361453
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GARDNER, MICHAEL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 BERKLEY CIR
 City HINGHAM State MA Zip Code 02043-3354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION STREET MANAGEMENT, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417217
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1658 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARMAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 FERN LANE
 City MCCORMICK State SC Zip Code 29835-3334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381964
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARMAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 FERN LANE
 City MCCORMICK State SC Zip Code 29835-3334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GARNER, CICERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 SOUTH LAGOON DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32408-6003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380324
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1659 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARNER, CICERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 SOUTH LAGOON DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32408-6003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.413277
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARNERO-HILL, GINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3104 NE US GRANT PL
 City PORTLAND State OR Zip Code 97212-5141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OREGON MANIFEST Occupation (for Individual) DEVELOPMENT DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362765
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. GAROUTTE, MARTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N SIESTA STREET
 City ANAHEIM State CA Zip Code 92801-1560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA FENCE & SUPPLY Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344376
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1660 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAROUTTE, MARTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N SIESTA STREET
 City ANAHEIM State CA Zip Code 92801-1560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA FENCE & SUPPLY Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359008
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. GAROUTTE, MARTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N SIESTA STREET
 City ANAHEIM State CA Zip Code 92801-1560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA FENCE & SUPPLY Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372559
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GAROUTTE, MARTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 N SIESTA STREET
 City ANAHEIM State CA Zip Code 92801-1560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA FENCE & SUPPLY Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420282
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1661 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARRETT, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX731**
 City **TERRELL** State **TX** Zip Code **75160-0014**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 11 / 2016
Transaction ID : SA11A.346532
 Amount of Each Receipt this Period
1000.00
 Memo Item
CONTRIBUTION

B. GARRETT, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **10694 N. LAUGHING COYOTE WAY**
 City **ORO VALLEY** State **AZ** Zip Code **85737-9001**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348408
 Amount of Each Receipt this Period
50.00
 Memo Item
CONTRIBUTION

C. GARRETT, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **10694 N. LAUGHING COYOTE WAY**
 City **ORO VALLEY** State **AZ** Zip Code **85737-9001**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348413
 Amount of Each Receipt this Period
50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1662 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARRETT, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10694 N. LAUGHING COYOTE WAY
 City ORO VALLEY State AZ Zip Code 85737-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355529
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GARRETT, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10694 N. LAUGHING COYOTE WAY
 City ORO VALLEY State AZ Zip Code 85737-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GARTIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST EXCHANGE STREET
 City MOUNT PLEASANT State IA Zip Code 52641-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.393798
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1663 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GARTIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST EXCHANGE STREET
 City MOUNT PLEASANT State IA Zip Code 52641-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414246
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GARTIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST EXCHANGE STREET
 City MOUNT PLEASANT State IA Zip Code 52641-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414251
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GARTIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST EXCHANGE STREET
 City MOUNT PLEASANT State IA Zip Code 52641-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422239
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1664 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARTON, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2437 SHADY TREE LANE
 City EDMOND State OK Zip Code 73013-5642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARTON, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2437 SHADY TREE LANE
 City EDMOND State OK Zip Code 73013-5642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398067
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GARTON, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2437 SHADY TREE LANE
 City EDMOND State OK Zip Code 73013-5642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398069
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1665 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARWOOD, CA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHUST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352341
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. GARWOOD, CA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHUST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.377483
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. GARWOOD, CA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9618 ROCKHUST DRIVE
 City HOUSTON State TX Zip Code 77080-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401482
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1666 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GASKILL, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 566

City WEBB CITY	State MO	Zip Code 64870-0566
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
08 / 01 / 2016
Transaction ID : SA11A.358641

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. GASPO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4887 EXCALIBUR DRIVE

City SYRACUSE	State NY	Zip Code 13215-9303
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HUNTINGTON BANK	Occupation (for Individual) BANKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016
Transaction ID : SA11A.354901

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. GAST, KENTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5759 CHARTEROAK DRIVE

City CINCINNATI	State OH	Zip Code 45236-2013
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1297.00	

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016
Transaction ID : SA11A.386335

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1667 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAST, KENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 CHARTEROAK DRIVE
 City CINCINNATI State OH Zip Code 45236-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1297.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394435
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GAST, KENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 CHARTEROAK DRIVE
 City CINCINNATI State OH Zip Code 45236-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1297.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397985
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GAST, KENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 CHARTEROAK DRIVE
 City CINCINNATI State OH Zip Code 45236-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1297.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413429
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1668 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GATES, ALONZO, E., MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 BURR RD
 City SAN ANTONIO State TX Zip Code 78209-6121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ENERGY PRODUCER, CATTLE RANC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7600.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354115
 Amount of Each Receipt this Period 7600.00
 Memo Item CONTRIBUTION

B. GATEWOOD, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11826 RUE BEAUJON CT.
 City TOMBALL State TX Zip Code 77377-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384730
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GATTI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 923
 City NEW LONDON State NH Zip Code 03257-0923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409191
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1669 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAUF, BERNARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2542 BABCOCK RD
 City VIENNA State VA Zip Code 22181-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INNOVATIVE DEFENSE TECHNOLOGIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421207
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. GAUM, WINSTON, E., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BARRINGTON ST.
 City ROCHESTER State NY Zip Code 14607-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388939
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. GAUM, WINSTON, E., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 BARRINGTON ST.
 City ROCHESTER State NY Zip Code 14607-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405229
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 11500.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1670 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354512
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

B. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379975
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

C. GAVIN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 VISTA CT
 City VERO BEACH State FL Zip Code 32962-0749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408664
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	165.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1671 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GAVIN, NORMAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 364 EAGLE DR
 City JUPITER State FL Zip Code 33477-4066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421214
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 N. LAKE SHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADER/INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360237
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 N. LAKE SHORE DR.
 City CHICAGO State IL Zip Code 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRADER/INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386885
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10200.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1672 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GAYNOR, GEORGE, , ,			Date of Receipt
Mailing Address 1500 N. LAKE SHORE DR.			<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City CHICAGO	State IL	Zip Code 60610-6686	Transaction ID : SA11A.419036
FEC ID number of contributing federal political committee. C <input type="text"/>			Amount of Each Receipt this Period <input type="text"/> 100.00
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) TRADER/INVESTMENTS	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 800.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GAYNOR, GEORGE, , ,			Date of Receipt
Mailing Address 1500 N. LAKE SHORE DR.			<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City CHICAGO	State IL	Zip Code 60610-6686	Transaction ID : SA11A.419366
FEC ID number of contributing federal political committee. C <input type="text"/>			Amount of Each Receipt this Period <input type="text"/> 100.00
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) TRADER/INVESTMENTS	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 800.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GAYNOR, LAVERN, , ,			Date of Receipt
Mailing Address 266 15TH AVE. S			<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City NAPLES	State FL	Zip Code 34102-7433	Transaction ID : SA11A.413337
FEC ID number of contributing federal political committee. C <input type="text"/>			Amount of Each Receipt this Period <input type="text"/> 250.00
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text"/> 500.00		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> 450.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1673 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GAYNOR, LAVERN, , ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2016		
Mailing Address 266 15TH AVE. S			Transaction ID : SA11A.413339		
City NAPLES	State FL	Zip Code 34102-7433	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GBUREK, JEROME, , ,			Date of Receipt MM / DD / YYYY 08 / 17 / 2016		
Mailing Address 545 LONE MOUNTAIN ROAD			Transaction ID : SA11A.369419		
City O'BRIEN	State OR	Zip Code 97534-9713	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GBUREK, JEROME, , ,			Date of Receipt MM / DD / YYYY 09 / 23 / 2016		
Mailing Address 545 LONE MOUNTAIN ROAD			Transaction ID : SA11A.406508		
City O'BRIEN	State OR	Zip Code 97534-9713	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1674 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEARHART, GREGORY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 306 E. COLLEGE ST
 City CLINTON State MS Zip Code 39056-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WGK INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409340
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GEARY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3219 W BAY VILLA
 City TAMPA State FL Zip Code 33611-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PWC Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349577
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GEARY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3219 W BAY VILLA
 City TAMPA State FL Zip Code 33611-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PWC Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410282
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1675 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEBARA, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11381 LONGWATER CHASE CT
 City FORT MYERS State FL Zip Code 33908-4965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372341
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GEBARA, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11381 LONGWATER CHASE CT
 City FORT MYERS State FL Zip Code 33908-4965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384310
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GEBARA, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11381 LONGWATER CHASE CT
 City FORT MYERS State FL Zip Code 33908-4965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384312
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1676 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEBARA, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11381 LONGWATER CHASE CT
 City FORT MYERS State FL Zip Code 33908-4965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403149
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GEBARA, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11381 LONGWATER CHASE CT
 City FORT MYERS State FL Zip Code 33908-4965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410273
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GEGER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1979 GLATT
 City ARNOLD State MO Zip Code 63010-2405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.370458
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1677 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEGER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1979 GLATT
 City ARNOLD State MO Zip Code 63010-2405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403248
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GEGER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1979 GLATT
 City ARNOLD State MO Zip Code 63010-2405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403252
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GEGG, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11213 MEADOW LANE
 City LEAWOOD State KS Zip Code 66211-3078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414313
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1678 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEGG, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11213 MEADOW LANE
 City LEAWOOD State KS Zip Code 66211-3078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414322
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GEGG, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11213 MEADOW LANE
 City LEAWOOD State KS Zip Code 66211-3078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414323
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GEHL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 SPRINGER MOUNTAIN DRIVE
 City CANTON State GA Zip Code 30114-4346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.366550
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1679 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEHRAND, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2980 PHILIPPE PARKWAY
 City SAFETY HARBOR State FL Zip Code 34695-5117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411909
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GEIBEL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 PROSPECT TER.
 City CORTLAND State NY Zip Code 13045-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349403
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GEIBEL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 PROSPECT TER.
 City CORTLAND State NY Zip Code 13045-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388869
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1680 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEIBEL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 PROSPECT TER.
 City CORTLAND State NY Zip Code 13045-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410737
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GEIER, PHILIP, H., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 E 55TH ST 15TH FL
 City NEW YORK State NY Zip Code 10022-3386
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362834
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. GEIER, SUSANNE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6000 REDBIRD HOLLOW LANE
 City CINCINNATI State OH Zip Code 45243-3331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383345
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 26100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1681 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEIGER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 CHERRY STREET
 City TOLEDO State OH Zip Code 43608-2901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.347859
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GEIKEN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9315 NESBIT LAKES DR
 City ALPHARETTA State GA Zip Code 30022-4022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLATINUM CIRCLE PARTNERS Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.408085
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GEIS, DONALD, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8505 FLYING CLOUD DRIVE APT 23
 City EDEN PRAIRIE State MN Zip Code 55344-3946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt **07 / 13 / 2016**
Transaction ID : SA11A.346201
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1682 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GEIS, WILLIAM, , ,		Date of Receipt
Mailing Address 8 EAGLES WAY		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2016"/>
City MIDDLETOWN	State NY	Zip Code 10940-2674
FEC ID number of contributing federal political committee. C		Transaction ID : SA11A.389793
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) INFORMATION REQUESTED PER BE		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GEISSINGER, FREDERICK, W., MR.,		Date of Receipt
Mailing Address 10 BROADMOOR DRIVE		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2016"/>
City RUNSON	State NJ	Zip Code 07760-1202
FEC ID number of contributing federal political committee. C		Transaction ID : SA11A.361361
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GEISSINGER, FREDERICK, W., MR.,		Date of Receipt
Mailing Address 10 BROADMOOR DRIVE		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City RUNSON	State NJ	Zip Code 07760-1202
FEC ID number of contributing federal political committee. C		Transaction ID : SA11A.380971
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1683 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENDRON, CHARLES, P.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PORTLAND SQUARE STE 6A
 City PORTLAND State ME Zip Code 04101-4057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENDRON GROUP Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367909
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. GENDRON, ROGER, J.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1718 M ST NW APT 351
 City WASHINGTON State DC Zip Code 20036-4504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVER STREET DEV CORP Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5035.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367876
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. GENDRON, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1711 S ST NW
 City WASHINGTON State DC Zip Code 20009-6117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.420485
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1684 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENSLE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23115 W. Q ROAD
 City ELKHORN State NE Zip Code 68022-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370561
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GENSLE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23115 W. Q ROAD
 City ELKHORN State NE Zip Code 68022-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380200
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GENSLE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23115 W. Q ROAD
 City ELKHORN State NE Zip Code 68022-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420061
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1685 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENSLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23115 W. Q ROAD
 City ELKHORN State NE Zip Code 68022-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422744
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. GENTINE, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 KRUMREY ST
 City PLYMOUTH State WI Zip Code 53073-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374601
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350172
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1318.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1686 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350180
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.356439
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363734
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1687 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370223
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380744
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383422
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1688 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384107
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384109
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385820
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1689 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GENTRY, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 S. LAGOON DR.
 City GILBERT State AZ Zip Code 85233-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408001
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GEORGE, BOYD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1820 4TH STREET PLACE NW
 City HICKORY State NC Zip Code 28601-8635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALEX LEE INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417034
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. GEORGE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1902
 City JACKSON State WY Zip Code 83001-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350926
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1690 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEORGE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1902
 City JACKSON State WY Zip Code 83001-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384699
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GEORGE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1902
 City JACKSON State WY Zip Code 83001-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390475
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347502
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1691 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERALDS, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 KIEV CT.

City WEST BLOOMFIELD	State MI	Zip Code 48324-1338
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350946

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GERALDS, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 KIEV CT.

City WEST BLOOMFIELD	State MI	Zip Code 48324-1338
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374669

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GERALDS, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 KIEV CT.

City WEST BLOOMFIELD	State MI	Zip Code 48324-1338
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390362

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1692 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399636
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 09 / 21 / 2016
Transaction ID : SA11A.401274
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.409699
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1693 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERALDS, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 KIEV CT.

City WEST BLOOMFIELD	State MI	Zip Code 48324-1338
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409701

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GERALDS, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 KIEV CT.

City WEST BLOOMFIELD	State MI	Zip Code 48324-1338
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409705

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GERALD, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2393 WINDWARD WAY

City NAPLES	State FL	Zip Code 34103-4760
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2016

Transaction ID : SA11A.349081

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1694 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERALD, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2393 WINDWARD WAY
 City NAPLES State FL Zip Code 34103-4760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357670
 Amount of Each Receipt this Period
 60.00
 Memo Item
 CONTRIBUTION

B. GERALD, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2393 WINDWARD WAY
 City NAPLES State FL Zip Code 34103-4760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.369062
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. GERALD, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2393 WINDWARD WAY
 City NAPLES State FL Zip Code 34103-4760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.379005
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 1695 OF 5722
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERALD, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2393 WINDWARD WAY
City NAPLES State FL Zip Code 34103-4760
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 280.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398657
Amount of Each Receipt this Period 30.00
Memo Item CONTRIBUTION

B. GERBER, BERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 181817
City CASSELBERRY State FL Zip Code 32718-1817
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GERBER PUMPS INTERNATIONAL, INC. Occupation (for Individual) TECHNICAL SALES
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 300.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390873
Amount of Each Receipt this Period 100.00
Memo Item CONTRIBUTION

C. GERBER, BERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 181817
City CASSELBERRY State FL Zip Code 32718-1817
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) GERBER PUMPS INTERNATIONAL, INC. Occupation (for Individual) TECHNICAL SALES
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402283
Amount of Each Receipt this Period 100.00
Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 230.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1696 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERBER, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 181817
 City CASSELBERRY State FL Zip Code 32718-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GERBER PUMPS INTERNATIONAL, INC. Occupation (for Individual) TECHNICAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402285
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GERBER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4203 HAMBLEDON VILLAGE DR.
 City HOUSTON State TX Zip Code 77014-1845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397148
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. GERBER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4203 HAMBLEDON VILLAGE DR.
 City HOUSTON State TX Zip Code 77014-1845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405166
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1697 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERBITZ, EDWARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 W POPE ROAD
 APT 57
 City SAINT AUGUSTINE State FL Zip Code 32080-6145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351146
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GERDING, MARY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 N LAKE SHORE DR
 #1121
 City CHICAGO State IL Zip Code 60611-3077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394443
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GERDING, MARY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 N LAKE SHORE DR
 #1121
 City CHICAGO State IL Zip Code 60611-3077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417706
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1698 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERNATT, DANIEL, R., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1434 ELLIS RD

City ANGOLA	State NY	Zip Code 14006-9109
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GERNATT ASPHALT	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385221

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. GERWIN, PAUL, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3114 GOLFSIDE DRIVE

City NAPLES	State FL	Zip Code 34110-7005
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.366046

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GHELANI, ATUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7312 S GARNETT RD
APT # 328

City BROKEN ARROW	State OK	Zip Code 74012-8683
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESSMAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415851

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1270.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1699 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GHELANI, ATUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7312 S GARNETT RD
 APT # 328
 City BROKEN ARROW State OK Zip Code 74012-8683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GHELANI, ATUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7312 S GARNETT RD
 APT # 328
 City BROKEN ARROW State OK Zip Code 74012-8683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416052
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GHELARDI, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17740 VIA BELLA ACQUA CT
 #402
 City MIROMAR LAKES State FL Zip Code 33913-7860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350581
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1700 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GHELARDI, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17740 VIA BELLA ACQUA CT #402

City MIROMAR LAKES State FL Zip Code 33913-7860

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 31 / 2016**

Transaction ID : SA11A.359065

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. GHELARDI, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17740 VIA BELLA ACQUA CT #402

City MIROMAR LAKES State FL Zip Code 33913-7860

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 19 / 2016**

Transaction ID : SA11A.374637

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. GHELARDI, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17740 VIA BELLA ACQUA CT #402

City MIROMAR LAKES State FL Zip Code 33913-7860

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 19 / 2016**

Transaction ID : SA11A.399648

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1701 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GHIRARDELLI, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 N OAK KNOLL AVE.
 305
 City PASADENA State CA Zip Code 91101-5638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393981
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GHYZEL, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 CHESTERFIELD DR.
 City NEWNAN State GA Zip Code 30265-2708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHWEST AIRLINES Occupation (for Individual) PILOT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354703
 Amount of Each Receipt this Period
 600.00
 Memo Item
 CONTRIBUTION

C. GIBB, ROBERT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 JOHN'S ISLAND DR
 City VERO BEACH State FL Zip Code 32963-3234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386462
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1702 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIBB, ROBERT, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 JOHN'S ISLAND DR

City VERO BEACH State FL Zip Code 32963-3234

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419374

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. GIBBONS, RICK, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 699

City RIDDLE State OR Zip Code 97469-0699

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLEN AND GIBBONS LOGGING Occupation (for Individual) LOGGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367893

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

C. GIBELLO, MARK, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14929 ALVA DR

City PACIFIC PALISADES State CA Zip Code 90272-4402

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346111

Amount of Each Receipt this Period 5400.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 8150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1703 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIBSON, FRED, D., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3204 PLAZA DE RAFAEL
 City LAS VEGAS State NV Zip Code 89102-4024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389446
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GIBSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6094 W 10760 N
 City HIGHLAND State UT Zip Code 84003-3487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417617
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GIDDENS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2186
 City LENOX State MA Zip Code 01240-5186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUGHES HUBBARD & REED LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411805
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1704 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIDDINGS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39475 CHARLES TOWN PIKE

City HAMILTON	State VA	Zip Code 20158-3321
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METRON, INC.	Occupation (for Individual) SENIOR ANALYST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422101

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. GIDWITZ, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 S WACKER DR STE 4000

City CHICAGO	State IL	Zip Code 60606-5821
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GCG PARTNERS	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.421173

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. GIEGERICH, JODY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6468 WASHINGTON ST SPC 76
76

City YOUNTVILLE	State CA	Zip Code 94599-1318
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.383172

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1705 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIEGERICH, JODY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6468 WASHINGTON ST SPC 76
 76
 City YOUNTVILLE State CA Zip Code 94599-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385105
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GIEGERICH, JODY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6468 WASHINGTON ST SPC 76
 76
 City YOUNTVILLE State CA Zip Code 94599-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391089
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GIEGERICH, JODY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6468 WASHINGTON ST SPC 76
 76
 City YOUNTVILLE State CA Zip Code 94599-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391091
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1706 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIEGERICH, JODY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6468 WASHINGTON ST SPC 76
 76
 City YOUNTVILLE State CA Zip Code 94599-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413677
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GIERS, S., M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 15TH AVENUE NW
 City WILLMAR State MN Zip Code 56201-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366334
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GIERS, S., M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 15TH AVENUE NW
 City WILLMAR State MN Zip Code 56201-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401105
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1707 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIESELMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9349 CLEARHURST DR
 City DALLAS State TX Zip Code 75238-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353237
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. GIESELMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9349 CLEARHURST DR
 City DALLAS State TX Zip Code 75238-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359101
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

C. GIESELMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9349 CLEARHURST DR
 City DALLAS State TX Zip Code 75238-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.359977
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1708 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIESELMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9349 CLEARHURST DR

City DALLAS	State TX	Zip Code 75238-3328
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372079

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GIESELMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9349 CLEARHURST DR

City DALLAS	State TX	Zip Code 75238-3328
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2016

Transaction ID : SA11A.392187

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. GIESELMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9349 CLEARHURST DR

City DALLAS	State TX	Zip Code 75238-3328
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2016

Transaction ID : SA11A.400057

Amount of Each Receipt this Period
18.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	73.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1709 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIESELMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9349 CLEARHURST DR

City DALLAS	State TX	Zip Code 75238-3328
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400067

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GIESELMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9349 CLEARHURST DR

City DALLAS	State TX	Zip Code 75238-3328
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420031

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

C. GIESMAN, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 NAUGATUCK AVE.
UNIT 5

City MILFORD	State CT	Zip Code 06460-6071
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353506

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	302.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1710 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIESZL, YALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6535

City SNOWMASS VILLAGE	State CO	Zip Code 81615-6535
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394743

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. GILBERT, CAMERON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5985 EAST 200 SOUTH

City KNOX	State IN	Zip Code 46534-7302
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NPH	Occupation (for Individual) HOSPITAL CEO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384659

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GILBERT, CAMERON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5985 EAST 200 SOUTH

City KNOX	State IN	Zip Code 46534-7302
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NPH	Occupation (for Individual) HOSPITAL CEO
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384663

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1711 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 BARTRAM COURT
 City FLOURTOWN State PA Zip Code 19031-1536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.377812
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GILBERT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14901 N PENNSYLVANIA AVENUE APT 289
 City OKLAHOMA CITY State OK Zip Code 73134-5963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.356550
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GILBERT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14901 N PENNSYLVANIA AVENUE APT 289
 City OKLAHOMA CITY State OK Zip Code 73134-5963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417089
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1712 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7725 168TH PL SW

City EDMONDS	State WA	Zip Code 98026-5011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2016

Transaction ID : SA11A.349082

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

B. GILBERT, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7725 168TH PL SW

City EDMONDS	State WA	Zip Code 98026-5011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.350058

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GILBERT, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7725 168TH PL SW

City EDMONDS	State WA	Zip Code 98026-5011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : SA11A.357639

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1713 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7725 168TH PL SW

City EDMONDS	State WA	Zip Code 98026-5011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404727

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. GILBERT, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4517 FIELDSTONE CR.

City SOUTHPORT	State NC	Zip Code 28461-8061
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356379

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GILBERT, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4517 FIELDSTONE CR.

City SOUTHPORT	State NC	Zip Code 28461-8061
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.383103

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1714 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILBERT, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4517 FIELDSTONE CR.
 City SOUTHPORT State NC Zip Code 28461-8061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383675
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GILBERT, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4517 FIELDSTONE CR.
 City SOUTHPORT State NC Zip Code 28461-8061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411332
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GILHAM, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 CAMDEN ROAD NE
 City ATLANTA State GA Zip Code 30309-1510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.395833
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1715 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILL, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 01740 SW MILITARY ROAD

City PORTLAND	State OR	Zip Code 97219-8384
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.411652

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. GILL, GALE, S., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 POINSETTA DR

City LITTLE ROCK	State AR	Zip Code 72205-2248
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353189

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GILL, GALE, S., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 POINSETTA DR

City LITTLE ROCK	State AR	Zip Code 72205-2248
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386172

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1716 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILL, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 WEST SHORELINE TERRACE
 City MUNCIE State IN Zip Code 47304-6092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GILL BROTHERS FURNITURE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387083
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GILLASPIE, BERTHA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 STADIUM VIEW
 City YORKTOWN State VA Zip Code 23690-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) FLORAL DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365381
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GILLASPIE, BERTHA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 STADIUM VIEW
 City YORKTOWN State VA Zip Code 23690-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) FLORAL DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369583
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1717 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLASPIE, BERTHA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 STADIUM VIEW
 City YORKTOWN State VA Zip Code 23690-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) FLORAL DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387651
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. GILLASPIE, BERTHA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 STADIUM VIEW
 City YORKTOWN State VA Zip Code 23690-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) FLORAL DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.395042
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. GILLESPIE, ALEXANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3111 BEVERLY DRIVE
 City DALLAS State TX Zip Code 75205-2922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATHADVANTAGE ASSOCIATED Occupation (for Individual) PATHOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349957
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 485.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1718 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLESPIE, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1260 COUNTY LINE RD
 City GATES MILLS State OH Zip Code 44040-9379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380485
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GILLESPIE, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1260 COUNTY LINE RD
 City GATES MILLS State OH Zip Code 44040-9379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380487
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GILLERAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SESSIONS STREET
 City WELLESLEY State MA Zip Code 02482-6033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.353962
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1719 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLERAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SESSIONS STREET
 City WELLESLEY State MA Zip Code 02482-6033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359851
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. GILLERAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SESSIONS STREET
 City WELLESLEY State MA Zip Code 02482-6033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370421
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GILLERAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SESSIONS STREET
 City WELLESLEY State MA Zip Code 02482-6033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374820
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	82.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1720 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9 SESSIONS STREET**

City WELLESLEY	State MA	Zip Code 02482-6033
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.382184

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

B. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9 SESSIONS STREET**

City WELLESLEY	State MA	Zip Code 02482-6033
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2016

Transaction ID : SA11A.384763

Amount of Each Receipt this Period

32.00

Memo Item
CONTRIBUTION

C. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **9 SESSIONS STREET**

City WELLESLEY	State MA	Zip Code 02482-6033
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2016

Transaction ID : SA11A.387471

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	82.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1721 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 SESSIONS STREET

City WELLESLEY	State MA	Zip Code 02482-6033
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392030

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 SESSIONS STREET

City WELLESLEY	State MA	Zip Code 02482-6033
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402503

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GILLERAN, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 SESSIONS STREET

City WELLESLEY	State MA	Zip Code 02482-6033
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419555

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	87.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1722 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLESPIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 965 WINDSOR PLACE CIR
 City GRAYSON State GA Zip Code 30017-4914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349663
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GILLESPIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 965 WINDSOR PLACE CIR
 City GRAYSON State GA Zip Code 30017-4914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370335
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GILLESPIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 965 WINDSOR PLACE CIR
 City GRAYSON State GA Zip Code 30017-4914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390590
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1723 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLESPIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 965 WINDSOR PLACE CIR
 City GRAYSON State GA Zip Code 30017-4914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GILLESPIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 965 WINDSOR PLACE CIR
 City GRAYSON State GA Zip Code 30017-4914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410384
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GILLENWATER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 KIMBER LANE
 City EVANSVILLE State IN Zip Code 47715-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEL MAR PROPERTIES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347424
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1724 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLENWATER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 KIMBER LANE
 City EVANSVILLE State IN Zip Code 47715-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEL MAR PROPERTIES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373363
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. GILLENWATER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 KIMBER LANE
 City EVANSVILLE State IN Zip Code 47715-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEL MAR PROPERTIES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391869
 Amount of Each Receipt this Period
 30.00
 Memo Item CONTRIBUTION

C. GILLENWATER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 KIMBER LANE
 City EVANSVILLE State IN Zip Code 47715-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEL MAR PROPERTIES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400172
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1725 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLENWATER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 KIMBER LANE
 City EVANSVILLE State IN Zip Code 47715-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEL MAR PROPERTIES Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423040
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GILLESPIE, MARIE, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3235 S RIVA RIDGE WAY
 City BOISE State ID Zip Code 83709-3806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.351849
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. GILLESPIE, MARIE, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3235 S RIVA RIDGE WAY
 City BOISE State ID Zip Code 83709-3806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379969
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1726 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLESPIE, MARIE, D., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3235 S RIVA RIDGE WAY

City BOISE	State ID	Zip Code 83709-3806
---------------	----------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417158

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GILLEN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 SIKES AVENUE

City CLEMSON	State SC	Zip Code 29631-2155
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359707

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GILLEN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 SIKES AVENUE

City CLEMSON	State SC	Zip Code 29631-2155
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388386

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1727 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLIES, EVELYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23822 HILLHURST DRIVE

City LAGUNA BEACH	State CA	Zip Code 92677-2237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.351158

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. GILLIES, EVELYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23822 HILLHURST DRIVE

City LAGUNA BEACH	State CA	Zip Code 92677-2237
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.376520

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GILLIAM, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 400 TRAVIS STREET
SUITE 1700

City SHREVEPORT	State LA	Zip Code 71101-3126
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348442

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1728 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILLIAM, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 TRAVIS STREET
 SUITE 1700
 City SHREVEPORT State LA Zip Code 71101-3126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365008
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GILLIAM, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 TRAVIS STREET
 SUITE 1700
 City SHREVEPORT State LA Zip Code 71101-3126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374610
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GILMARTIN, GLADYS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7739 SE LOBLOLLY BAY DRIVE
 City HOBE SOUND State FL Zip Code 33455-3830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358585
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1729 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILMAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 MOORSIDE DR
 City SAN ANTONIO State TX Zip Code 78239-2635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374283
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GILMAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 MOORSIDE DR
 City SAN ANTONIO State TX Zip Code 78239-2635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374528
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GILMAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 MOORSIDE DR
 City SAN ANTONIO State TX Zip Code 78239-2635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399661
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1730 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILMORE, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57EAST75
 3
 City NEW YORK State NY Zip Code 10021-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344329
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

B. GILMORE, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57EAST75
 3
 City NEW YORK State NY Zip Code 10021-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408269
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GILMORE, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57EAST75
 3
 City NEW YORK State NY Zip Code 10021-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414957
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	331.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1731 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GILMORE, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 57EAST75
3

City NEW YORK State NY Zip Code 10021-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.414967

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GINGOLD, GILBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3398 SOUTHERN CAY DRIVE

City JUPITER State FL Zip Code 33477-1375

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HERITAGE CHEMICAL Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11A.380813

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GINGOLD, GILBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3398 SOUTHERN CAY DRIVE

City JUPITER State FL Zip Code 33477-1375

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HERITAGE CHEMICAL Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
560.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11A.380814

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1732 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GINGOLD, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3398 SOUTHERN CAY DRIVE
 City JUPITER State FL Zip Code 33477-1375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERITAGE CHEMICAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386254
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GINGOLD, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3398 SOUTHERN CAY DRIVE
 City JUPITER State FL Zip Code 33477-1375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERITAGE CHEMICAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386256
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GINN, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 NEW PLACE ROAD
 City HILLSBOROUGH State CA Zip Code 94010-6448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397063
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1733 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GINNETTI, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 415 LISBON ROAD

City CANTERBURY	State CT	Zip Code 06331-1707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382187

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. GIOIA, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 925 DELAWARE AVE #7D
APT. 7D

City BUFFALO	State NY	Zip Code 14209-1858
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.395817

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. GIORDANO, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7528 ESCALA DR

City AUSTIN	State TX	Zip Code 78735-1523
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388747

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5275.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1734 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIORDANO, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7528 ESCALA DR

City AUSTIN	State TX	Zip Code 78735-1523
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2016

Transaction ID : SA11A.401260

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GIPPLE, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 579

City DANA POINT	State CA	Zip Code 92629-0579
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2016

Transaction ID : SA11A.345228

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. GIRARDIN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 693 HICKORY RD

City NAPLES	State FL	Zip Code 34108-2638
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
547.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2016

Transaction ID : SA11A.372126

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1735 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRARDIN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 693 HICKORY RD
 City NAPLES State FL Zip Code 34108-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 547.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415265
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351953
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385986
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1736 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385991
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386004
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399053
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1737 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419356
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. GIRAUD, JUDY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 HEATHROW DR UNIT 293
 City AMES State IA Zip Code 50014-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419404
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. GIRVIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 COURTLAND PINES DR
 City HOLLISTON State MA Zip Code 01746-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.385003
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1738 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRVIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 COURTLAND PINES DR
 City HOLLISTON State MA Zip Code 01746-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387275
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GIRVIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 COURTLAND PINES DR
 City HOLLISTON State MA Zip Code 01746-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398130
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GIRVIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 COURTLAND PINES DR
 City HOLLISTON State MA Zip Code 01746-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398156
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1739 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRVIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 COURTLAND PINES DR

City HOLLISTON	State MA	Zip Code 01746-3508
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.400952

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GIRVIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 COURTLAND PINES DR

City HOLLISTON	State MA	Zip Code 01746-3508
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403769

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GIRVIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 COURTLAND PINES DR

City HOLLISTON	State MA	Zip Code 01746-3508
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403839

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1740 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GIRVIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 COURTLAND PINES DR
 City HOLLISTON State MA Zip Code 01746-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409889
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GITCHEL, JUDY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 /SHEFFIELD COURT
 City NEKOOSA State WI Zip Code 54457-9198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353279
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GITCHEL, JUDY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 /SHEFFIELD COURT
 City NEKOOSA State WI Zip Code 54457-9198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357239
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1741 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GITCHEL, JUDY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 /SHEFFIELD COURT
 City NEKOOSA State WI Zip Code 54457-9198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362194
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GITCHEL, JUDY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 /SHEFFIELD COURT
 City NEKOOSA State WI Zip Code 54457-9198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401244
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GITCHEL, JUDY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 /SHEFFIELD COURT
 City NEKOOSA State WI Zip Code 54457-9198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411536
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1742 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GITS, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 58TH PL

City HINSDALE	State IL	Zip Code 60521-4982
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350910

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GITS, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 58TH PL

City HINSDALE	State IL	Zip Code 60521-4982
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386774

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GITS, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 58TH PL

City HINSDALE	State IL	Zip Code 60521-4982
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398632

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1743 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GITS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 446 58TH PL
 City HINSDALE State IL Zip Code 60521-4982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402929
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GITS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 446 58TH PL
 City HINSDALE State IL Zip Code 60521-4982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417917
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5708 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348740
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1744 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GJAJA, NIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5708 IRON STONE ROAD

City LOTHIAN	State MD	Zip Code 20711-3108
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368042

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GJAJA, NIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5708 IRON STONE ROAD

City LOTHIAN	State MD	Zip Code 20711-3108
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386199

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GJAJA, NIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5708 IRON STONE ROAD

City LOTHIAN	State MD	Zip Code 20711-3108
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386210

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1745 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5708 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5708 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397920
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5708 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1746 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5708 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416815
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GJAJA, NIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5708 IRON STONE ROAD
 City LOTHIAN State MD Zip Code 20711-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420425
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GJELDE, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1235
 City DILLON State CO Zip Code 80435-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359227
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1747 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GJELDE, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1235
 City DILLON State CO Zip Code 80435-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.385160
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GJELDE, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1235
 City DILLON State CO Zip Code 80435-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.385161
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GJELDE, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1235
 City DILLON State CO Zip Code 80435-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.398401
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1748 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GJELDE, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1235
 City DILLON State CO Zip Code 80435-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409259
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GJELDE, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1235
 City DILLON State CO Zip Code 80435-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413785
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. GLAMUZINA, VICTORIA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 GULL LANDING
 City BUFFALO State NY Zip Code 14202-4342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGETOWN SQ LIQUORS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.383551
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1450.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1749 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLASCOCK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4487 POST PLACE #85
 City NASHVILLE State TN Zip Code 37205-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358922
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GLASHEEN, KEVIN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3308 A ENFIELD
 City AUSTIN State TX Zip Code 78703-3608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345256
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. GLASS, CARTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8909 REARDEN ROAD
 City RICHMOND State VA Zip Code 23229-8118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351106
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1750 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLASS, CARTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8909 REARDEN ROAD

City RICHMOND	State VA	Zip Code 23229-8118
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365182

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GLASS, CARTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8909 REARDEN ROAD

City RICHMOND	State VA	Zip Code 23229-8118
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.378154

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GLAVIN, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 26 GARWOOD LANE

City MOULTONBOROUGH	State NH	Zip Code 03254-2805
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MASSMUTUAL	Occupation (for Individual) INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.363021

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1751 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLAVIN, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 GARWOOD LANE
 City MOULTONBOROUGH State NH Zip Code 03254-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.363018
 Amount of Each Receipt this Period
 5400.00
 Memo Item
 CONTRIBUTION

B. GLEASON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1923 GABLES LANE
 City VIENNA State VA Zip Code 22182-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016
Transaction ID : SA11A.345929
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. GLEASON, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1825 7TH STREET APT 822
 City WASHINGTON State DC Zip Code 20001-5180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357217
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6031.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1752 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLEASON, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 955 LEXINGTON AVENUE
5-B

City NEW YORK State NY Zip Code 10021-5128

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.415743

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GLEESON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 RED BRIDGE DRIVE

City SIOUX CITY State IA Zip Code 51104-1061

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLINGER COMPANIES, INC Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2016

Transaction ID : SA11A.361139

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. GLENDINNING, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 318 S. BEACH RD.

City HOBE SOUND State FL Zip Code 33455-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.360205

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1753 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLENDINNING, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 S. BEACH RD.
 City HOBE SOUND State FL Zip Code 33455-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418149
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GLENN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 BARTLETT AVE
 City LINWOOD State NJ Zip Code 08221-1137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLENN INSURANCE, INC. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.358446
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GLENN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 BARTLETT AVE
 City LINWOOD State NJ Zip Code 08221-1137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLENN INSURANCE, INC. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382649
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1754 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLENN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 BARTLETT AVE
 City LINWOOD State NJ Zip Code 08221-1137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLENN INSURANCE, INC. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382650
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GLENN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5387 SHEAWATER DR.
 City SANIBEL State FL Zip Code 33957-2328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PLEASING MY SPOUSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409452
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GLIDDEN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 VIENNA PKWY
 City CENTERVILLE State OH Zip Code 45459-1372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SMALL OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364864
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1755 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GLIDDEN, DENNIS, , ,		Date of Receipt MM / DD / YYYY 08 / 19 / 2016
Mailing Address 2330 VIENNA PKWY		Transaction ID : SA11A.374931
City CENTERVILLE	State OH	Zip Code 45459-1372
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SMALL OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GLIDDEN, DENNIS, , ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016
Mailing Address 2330 VIENNA PKWY		Transaction ID : SA11A.386401
City CENTERVILLE	State OH	Zip Code 45459-1372
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SMALL OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GLIDDEN, DENNIS, , ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016
Mailing Address 2330 VIENNA PKWY		Transaction ID : SA11A.386403
City CENTERVILLE	State OH	Zip Code 45459-1372
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SMALL OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1756 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GLOR, PETER, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9589 COBBLESTONE DR
 City CLARENCE State NY Zip Code 14031-2421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHMITT SALES Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391529
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GLOVER JR., HOWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6643 GARDEN PALM CT.
 City NEW PORT RICHEY State FL Zip Code 34655-5117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412747
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GLUSE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3048 STRATFORD DRIVE
 City CHESAPEAKE State VA Zip Code 23321-5824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGE G. SHARP, INC. Occupation (for Individual) NAVAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408558
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1757 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GLYE, WILLIAM, H., MR.,

Mailing Address **2960 GOOSE CREEK ROAD**

City LOUISVILLE	State KY	Zip Code 40241-2403
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : SA11A.346265

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GLYE, WILLIAM, H., MR.,

Mailing Address **2960 GOOSE CREEK ROAD**

City LOUISVILLE	State KY	Zip Code 40241-2403
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2016

Transaction ID : SA11A.406578

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GLYE, WILLIAM, H., MR.,

Mailing Address **2960 GOOSE CREEK ROAD**

City LOUISVILLE	State KY	Zip Code 40241-2403
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Transaction ID : SA11A.417240

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1758 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GMEINDER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 32ND STREET W
 City BARDENTON State FL Zip Code 34205-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CABINET BUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396970
 Amount of Each Receipt this Period 350.00
 Memo Item CONTRIBUTION

B. GNAZZO, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 COMMONWEALTH AVE
 City BOSTON State MA Zip Code 02116-2221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382620
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GOBER, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3323
 City BROOKINGS State OR Zip Code 97415-0535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TIMBER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373409
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1759 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODDEN, QUINDRID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 E APACHE SPRINGS LANE
 City GREEN VALLEY State AZ Zip Code 85614-5534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345857
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GODDEN, QUINDRID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 E APACHE SPRINGS LANE
 City GREEN VALLEY State AZ Zip Code 85614-5534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349116
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GODDEN, QUINDRID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 E APACHE SPRINGS LANE
 City GREEN VALLEY State AZ Zip Code 85614-5534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358029
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1760 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODDEN, QUINDRID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 E APACHE SPRINGS LANE
 City GREEN VALLEY State AZ Zip Code 85614-5534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.363014
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GODDEN, QUINDRID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 E APACHE SPRINGS LANE
 City GREEN VALLEY State AZ Zip Code 85614-5534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 05 / 2016
Transaction ID : SA11A.389116
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GODDIK, JOHANNES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21215 SE NECK RD
 City DAYTON State OR Zip Code 97114-7819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361320
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1761 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODDIK, JOHANNES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21215 SE NECK RD
 City DAYTON State OR Zip Code 97114-7819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391404
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. GODFREY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 381 RAINBOW DRIVE
 City STROUDSBURG State PA Zip Code 18360-8598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNNCO Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349492
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GODFREY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 4TH STREET
 City DESOTO State IL Zip Code 62924-3534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTON Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403265
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1762 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODFREY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 4TH STREET
 City DESOTO State IL Zip Code 62924-3534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTON Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403268
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GODFREY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 4TH STREET
 City DESOTO State IL Zip Code 62924-3534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTON Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410831
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GODFREY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 4TH STREET
 City DESOTO State IL Zip Code 62924-3534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTON Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410834
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1763 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODWIN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3109 GRAND AVE
 345
 City MIAMI State FL Zip Code 33133-5103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J GODWIN Occupation (for Individual) INVESTMENTS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349185
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GODWIN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3109 GRAND AVE
 345
 City MIAMI State FL Zip Code 33133-5103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J GODWIN Occupation (for Individual) INVESTMENTS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349186
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GODWIN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3109 GRAND AVE
 345
 City MIAMI State FL Zip Code 33133-5103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J GODWIN Occupation (for Individual) INVESTMENTS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398326
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1764 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOERKE, B, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7990 S. CLAYTON ST

City CENTENNIAL	State CO	Zip Code 80122-3474
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ST. MARY'S CATHOLIC SCHOOL	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357554

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GOERKE, B, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7990 S. CLAYTON ST

City CENTENNIAL	State CO	Zip Code 80122-3474
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ST. MARY'S CATHOLIC SCHOOL	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382758

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GOETSCH, KATHLEEN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 48383 ROAD 620

City OAKHURST	State CA	Zip Code 93644-8519
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.360284

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1765 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOETSCH, KATHLEEN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48383 ROAD 620
 City OAKHURST State CA Zip Code 93644-8519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389536
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GOFFIN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CHATHAM LANE
 City PALMYRA State VA Zip Code 22963-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALESSOLUTIONS,LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350061
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GOFFIN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CHATHAM LANE
 City PALMYRA State VA Zip Code 22963-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALESSOLUTIONS,LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368143
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1766 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOFFIN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CHATHAM LANE
 City PALMYRA State VA Zip Code 22963-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALESOLUTIONS,LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391049
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GOFFIN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 CHATHAM LANE
 City PALMYRA State VA Zip Code 22963-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALESOLUTIONS,LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403478
 Amount of Each Receipt this Period
 65.00
 Memo Item
 CONTRIBUTION

C. GOFORTH, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5527 W. AVENUE L4
 City LANCASTER State CA Zip Code 93536-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417860
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	415.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1767 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOFORTH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 LOUISIANA SUITE 1900
 City HOUSTON State TX Zip Code 77002-2788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOFORTH LAW FIRM P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368204
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GOFORTH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 LOUISIANA SUITE 1900
 City HOUSTON State TX Zip Code 77002-2788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOFORTH LAW FIRM P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409398
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GOFORTH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 RIM RD.
 City LOS ALAMOS State NM Zip Code 87544-2952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357564
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1768 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOFORTH, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 845 RIM RD.

City LOS ALAMOS	State NM	Zip Code 87544-2952
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
08 / 20 / 2016
Transaction ID : SA11A.376030

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GOFORTH, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 845 RIM RD.

City LOS ALAMOS	State NM	Zip Code 87544-2952
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
08 / 20 / 2016
Transaction ID : SA11A.376031

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GOFORTH, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 845 RIM RD.

City LOS ALAMOS	State NM	Zip Code 87544-2952
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt
09 / 01 / 2016
Transaction ID : SA11A.389374

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1769 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOFORTH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 RIM RD.
 City LOS ALAMOS State NM Zip Code 87544-2952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396607
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GOFORTH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 RIM RD.
 City LOS ALAMOS State NM Zip Code 87544-2952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405075
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GOGGIO, ERNEST, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2322 BROADWAY STREET
 City SAN FRANCISCO State CA Zip Code 94115-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365267
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1770 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOGINENI, SAMRAJYA, L. K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 QUAIL PINES DRIVE
 City LEESBURG State GA Zip Code 31763-5364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHOEBE HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364506
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GOLDEN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 3RD STREET NW
 City CENTER POINT State AL Zip Code 35215-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370876
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GOLDEN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 3RD STREET NW
 City CENTER POINT State AL Zip Code 35215-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370878
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1771 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDEN, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2117 3RD STREET NW

City CENTER POINT	State AL	Zip Code 35215-3431
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403176

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GOLDEN, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2117 3RD STREET NW

City CENTER POINT	State AL	Zip Code 35215-3431
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403841

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GOLDEN, WARREN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 COLTON RD

City MAHOPAC	State NY	Zip Code 10541-1925
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITYWIDE MOBILE RESPONSE	Occupation (for Individual) EMS
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.398482

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1772 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDING, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 TOWER TERRACE ROAD
 City CEDAR RAPIDS State IA Zip Code 52411-7946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIFF Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380929
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GOLDRICH, LAWRNCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6474 COLLEGE PARK SQ. SUTE 306
 City VIRGINIA BEACH State VA Zip Code 23464-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383242
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GOLDRICH, LAWRNCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6474 COLLEGE PARK SQ. SUTE 306
 City VIRGINIA BEACH State VA Zip Code 23464-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383244
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1773 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDRICH, LAWRNCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6474 COLLEGE PARK SQ.
 SUTE 306
 City VIRGINIA BEACH State VA Zip Code 23464-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407987
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GOLDSMITH, ALAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3959 CLUB DRIVE NE
 City ATLANTA State GA Zip Code 30319-1146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365253
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GOLDSPIK, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 YORK AVENUE
 2K
 City NEW YORK State NY Zip Code 10065-7169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348570
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1774 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDSPINK, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 YORK AVENUE
 2K
 City NEW YORK State NY Zip Code 10065-7169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358394
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GOLDSPINK, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 YORK AVENUE
 2K
 City NEW YORK State NY Zip Code 10065-7169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.369055
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GOLDSPINK, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 YORK AVENUE
 2K
 City NEW YORK State NY Zip Code 10065-7169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394413
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1775 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDSPINK, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1175 YORK AVENUE
2K

City NEW YORK State NY Zip Code 10065-7169

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.416699

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GOLDSTEIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 AVE OF THE STARS
1805

City LOS ANGELES State CA Zip Code 90067-5655

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.363142

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

C. GOLDSTEIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2222 AVE OF THE STARS
1805

City LOS ANGELES State CA Zip Code 90067-5655

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
316.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.363143

Amount of Each Receipt this Period
18.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 73.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1776 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDSTEIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 AVE OF THE STARS
 1805
 City LOS ANGELES State CA Zip Code 90067-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363144
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

B. GOLDSTEIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 AVE OF THE STARS
 1805
 City LOS ANGELES State CA Zip Code 90067-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363150
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GOLDSTEIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 AVE OF THE STARS
 1805
 City LOS ANGELES State CA Zip Code 90067-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405545
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	193.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1777 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLDSTEIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 AVE OF THE STARS
 1805
 City LOS ANGELES State CA Zip Code 90067-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420321
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GOLDSTEIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2222 AVE OF THE STARS
 1805
 City LOS ANGELES State CA Zip Code 90067-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420327
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GOLDSCHMIDT, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4413 WATROUS AVENUE
 City TAMPA State FL Zip Code 33629-4229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368500
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1778 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOLUB, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3399 PGA BLVD.
 360
 City PALM BEACH GARDENS State FL Zip Code 33410-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 7000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352743
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. GOLUB, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3399 PGA BLVD.
 360
 City PALM BEACH GARDENS State FL Zip Code 33410-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 7000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372826
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. GOMES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2053 RIESLING WAY
 City CAMERON PARK State CA Zip Code 95682-7730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERISIGN, INC. Occupation (for Individual) VP POLICY
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391171
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1779 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOMES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2053 RIESLING WAY
 City CAMERON PARK State CA Zip Code 95682-7730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERISIGN, INC. Occupation (for Individual) VP POLICY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.423087
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. GOMES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2053 RIESLING WAY
 City CAMERON PARK State CA Zip Code 95682-7730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERISIGN, INC. Occupation (for Individual) VP POLICY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.423089
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. GOMEZ, RAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 415848
 City MIAMI BEACH State FL Zip Code 33141-7848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419064
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1780 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOOD, RAMONA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2104 STRATFORD DR.
UNIT A

City MONTROSE	State CO	Zip Code 81401-5219
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11A.359980

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GOOD, RAMONA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2104 STRATFORD DR.
UNIT A

City MONTROSE	State CO	Zip Code 81401-5219
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.391127

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GOOD, RAMONA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2104 STRATFORD DR.
UNIT A

City MONTROSE	State CO	Zip Code 81401-5219
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407881

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1781 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GOOD, RAMONA, , ,

Mailing Address 2104 STRATFORD DR.
UNIT A

City MONTROSE State CO Zip Code 81401-5219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.409103

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GOOD, RAMONA, , ,

Mailing Address 2104 STRATFORD DR.
UNIT A

City MONTROSE State CO Zip Code 81401-5219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.422417

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GOODALL, ARTHUR, , ,

Mailing Address 401 CHARLEMAGNE DR

City LAKE SAINT LOUIS State MO Zip Code 63367-2430

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.388369

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1782 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODALL, JACKSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8814
 City RANCHO SANTA FE State CA Zip Code 92067-8814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387619
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 CENTURY PARK LANE #105
 City LOS ANGELES State CA Zip Code 90067-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348493
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 CENTURY PARK LANE #105
 City LOS ANGELES State CA Zip Code 90067-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357411
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1783 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 CENTURY PARK LANE #105
 City LOS ANGELES State CA Zip Code 90067-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357412
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 CENTURY PARK LANE #105
 City LOS ANGELES State CA Zip Code 90067-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372713
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 CENTURY PARK LANE #105
 City LOS ANGELES State CA Zip Code 90067-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391296
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1784 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 CENTURY PARK LANE #105

City LOS ANGELES	State CA	Zip Code 90067-3308
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.391300

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 CENTURY PARK LANE #105

City LOS ANGELES	State CA	Zip Code 90067-3308
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.391301

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GOODEN, MARIKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 CENTURY PARK LANE #105

City LOS ANGELES	State CA	Zip Code 90067-3308
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016

Transaction ID : SA11A.399922

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1785 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODEN, MARIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 CENTURY PARK LANE #105

City LOS ANGELES	State CA	Zip Code 90067-3308
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418492

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GOODEN, MARIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 CENTURY PARK LANE #105

City LOS ANGELES	State CA	Zip Code 90067-3308
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418516

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GOODEN, MARIKO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2112 CENTURY PARK LANE #105

City LOS ANGELES	State CA	Zip Code 90067-3308
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418517

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1786 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODMAN, BRIAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15009 S 14TH PLACE
 City PHOENIX State AZ Zip Code 85048-6242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397443
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GOODMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2385 HAFF DRIVE
 City STERLING HEIGHTS State MI Zip Code 48314-4518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389317
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GOODMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2385 HAFF DRIVE
 City STERLING HEIGHTS State MI Zip Code 48314-4518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398821
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1787 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODMAN, MICHAEL, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 ROBINHOOD ROAD
City ASHEVILLE State NC Zip Code 28804-1636
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BUNCOMBE CONSTRUCTION Occupation (for Individual) PRESIDENT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 02 / 2016**
Transaction ID : SA11A.389023
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GOODMAN, PAUL, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 99 S SERVICE ROAD APT. 402
City NEW HYDE PARK State NY Zip Code 11040-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 335.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.362874
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GOODMAN, PAUL, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 99 S SERVICE ROAD APT. 402
City NEW HYDE PARK State NY Zip Code 11040-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 335.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417417
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1788 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODNIGHT, ANNE, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ASH COURT

City LAFAYETTE	State IN	Zip Code 47905-3902
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398493

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. GOODNIGHT, ANNE, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ASH COURT

City LAFAYETTE	State IN	Zip Code 47905-3902
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416822

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. GOODNICK, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13865A JEWEL AVENUE
519

City FLUSHING	State NY	Zip Code 11367-1932
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VAMC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399763

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1789 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODRICH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 DEEP BROOK RD
 City WYCKOFF State NJ Zip Code 07481-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 05 / 2016**
Transaction ID : SA11A.389099
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GOODYEAR, PRISCILLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10042 SIGNET CIRCLE
 City HUNTINGTON BEACH State CA Zip Code 92646-6631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.352798
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GOODYEAR, PRISCILLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10042 SIGNET CIRCLE
 City HUNTINGTON BEACH State CA Zip Code 92646-6631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368306
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1790 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GOODYEAR, PRISCILLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10042 SIGNET CIRCLE
 City HUNTINGTON BEACH State CA Zip Code 92646-6631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.411517
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GORDON, BAYFIELD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVENUE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 11 / 2016**
Transaction ID : SA11A.346818
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GORDON, BAYFIELD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 SANTA ANA AVENUE SE
 City ALBUQUERQUE State NM Zip Code 87123-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.373589
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1791 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, DAVID, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 937

City RANCHESTER	State WY	Zip Code 82839-0937
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00

Date of Receipt
07 / 31 / 2016

Transaction ID : SA11A.359596

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. GORDON, DAVID, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 937

City RANCHESTER	State WY	Zip Code 82839-0937
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00

Date of Receipt
08 / 31 / 2016

Transaction ID : SA11A.386953

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. GORDON, ROSALITA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 149 PATRIOTS ROAD

City MORRIS PLAINS	State NJ	Zip Code 07950-1148
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
08 / 30 / 2016

Transaction ID : SA11A.384596

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1792 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384614
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388749
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405892
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1793 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405895
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413692
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418867
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1794 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418988
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GORDON, ROSALITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 PATRIOTS ROAD
 City MORRIS PLAINS State NJ Zip Code 07950-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419312
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GORDON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SAVANNAH CIRCLE
 City FRISCO State TX Zip Code 75034-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394748
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1795 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 N. NASH STREET
 APT 839
 City ARLINGTON State VA Zip Code 22209-3649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383597
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GORE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 N. NASH STREET
 APT 839
 City ARLINGTON State VA Zip Code 22209-3649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418744
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GORE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 MADISON AVE 23 FLOOR
 City NEW YORK State NY Zip Code 10022-8594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 999.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2016
Transaction ID : SA11A.389197
 Amount of Each Receipt this Period
 999.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1199.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1796 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORE, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 631 WEST TIMONIUM ROAD
 City LUTHERVILLE State MD Zip Code 21093-1828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGA CAPITAL, LLC Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356392
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. GORGONE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11331 S FOREST DR.
 City PAINESVILLE State OH Zip Code 44077-8958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372491
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. GORLYN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 MADISON AVENUE
 City ENGLEWOOD State NJ Zip Code 07631-4339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414422
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1797 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORMAN, GARY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 N MAIN STREET
 City OREGON State WI Zip Code 53575-1447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GORMAN & CO Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391341
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GORMAN, GARY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 N MAIN STREET
 City OREGON State WI Zip Code 53575-1447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GORMAN & CO Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398464
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GORMAN, JAMES, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2599
 City MANSFIELD State OH Zip Code 44906-0599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GORMAN RUPP CO Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394982
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1798 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORMAN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 DOVECOTE LANE
 City VILLANOVA State PA Zip Code 19085-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387691
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GORMAN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 DOVECOTE LANE
 City VILLANOVA State PA Zip Code 19085-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405143
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GORMAN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 DOVECOTE LANE
 City VILLANOVA State PA Zip Code 19085-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405160
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1799 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GORMAN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 DOVECOTE LANE
 City VILLANOVA State PA Zip Code 19085-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405161
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GORMAN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 DOVECOTE LANE
 City VILLANOVA State PA Zip Code 19085-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420266
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GORMAN, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 DOVECOTE LANE
 City VILLANOVA State PA Zip Code 19085-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420281
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1800 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOSS, ARTHUR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PATRIOT HEIGHTS APT 4415
 APT 4415
 City COLORADO SPRINGS State CO Zip Code 80904-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351209
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GOSS, ARTHUR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PATRIOT HEIGHTS APT 4415
 APT 4415
 City COLORADO SPRINGS State CO Zip Code 80904-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 02 / 2016
Transaction ID : SA11A.360085
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GOSS, ARTHUR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PATRIOT HEIGHTS APT 4415
 APT 4415
 City COLORADO SPRINGS State CO Zip Code 80904-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377728
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1801 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOSS, ARTHUR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PATRIOT HEIGHTS APT 4415
 APT 4415
 City COLORADO SPRINGS State CO Zip Code 80904-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392747
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GOSS, ARTHUR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PATRIOT HEIGHTS APT 4415
 APT 4415
 City COLORADO SPRINGS State CO Zip Code 80904-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.396149
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GOSSETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 EAST 85TH STREET
 City NEW YORK State NY Zip Code 10028-6302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.363010
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1802 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOTHIER SR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 NORTH FRONT STREET
 SUITE 500
 City WORMLEYSBURG State PA Zip Code 17043-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RVG MANAGEMENT & DEV CO Occupation (for Individual) COMMERCIAL REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412802
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GOTTLIEB, MORRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2821 E PRESIDENT GEORGE BUSH HWY
 SUITE 509
 City RICHARDSON State TX Zip Code 75082-4278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH DALLAS EAR, NOSE & THROAT, P.A. Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402442
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. GOTTSCHALK, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 DALY AVENUE
 City WISCONSIN RAPIDS State WI Zip Code 54494-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOTTSCHALK CRANBERRY, INC. Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411688
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1803 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOTTSACKER, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3313 SKYLINE BOULEVARD
 City RENO State NV Zip Code 89509-5658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406753
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. GOTTWALD, FLOYD, D., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HERNDON ROAD
 City RICHMOND State VA Zip Code 23229-8214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389502
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. GOTTWALD, MARK, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 LYNTON LANE
 City RICHMOND State VA Zip Code 23221-3704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHIPS INN Occupation (for Individual) CHEF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.374066
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1804 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13796 RIVOLI DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33410-1256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391728
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13796 RIVOLI DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33410-1256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398199
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13796 RIVOLI DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33410-1256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398221
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1805 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28536 TALORI TERRACE
 City BONITA SPRINGS State FL Zip Code 34135-8384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409385
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28536 TALORI TERRACE
 City BONITA SPRINGS State FL Zip Code 34135-8384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422128
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GOULDING, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2783 EVANS ROAD
 City WENONA State IL Zip Code 61377-9422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OAK STATE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.346224
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1806 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOWMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 N. NORRIS AVE.
 City PHOENIXVILLE State PA Zip Code 19460-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358290
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GOWMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 N. NORRIS AVE.
 City PHOENIXVILLE State PA Zip Code 19460-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382456
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GOWMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 N. NORRIS AVE.
 City PHOENIXVILLE State PA Zip Code 19460-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416174
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1807 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GOYANES, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16870 NW 78TH PLACE
 City MIAMI LAKES State FL Zip Code 33016-3403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360093
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GOYANES, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16870 NW 78TH PLACE
 City MIAMI LAKES State FL Zip Code 33016-3403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406938
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRABLE, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 MAIN STREET STE 2500
 City FORT WORTH State TX Zip Code 76102-3129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389818
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1808 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GRADY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 LOCKE LANE

City BENTON	State TN	Zip Code 37307-4737
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386052

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GRADY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 LOCKE LANE

City BENTON	State TN	Zip Code 37307-4737
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397909

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. GRADY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 LOCKE LANE

City BENTON	State TN	Zip Code 37307-4737
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399486

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1809 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRADY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LOCKE LANE
 City BENTON State TN Zip Code 37307-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419442
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GRADY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 UPLAND WAY
 City HADDONFIELD State NJ Zip Code 08033-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXL LLC Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.362829
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 CONTRIBUTION

C. GRAF, A JAY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1569
 City WOLFEBORO State NH Zip Code 03894-1569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378293
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1810 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAF, ALBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 UMBRELLA POINT, P.O. BOX 1569
PO BOX 1569

City WOLFEBORO State NH Zip Code 03894-1569

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5001.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388588

Amount of Each Receipt this Period 5001.00

Memo Item CONTRIBUTION

B. GRAF, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 99

City WHEELERSBURG State OH Zip Code 45694-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) APPALACHIAN WOOD FLOORS INC Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388880

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. GRAF, MARY ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1569

City WOLFEBORO State NH Zip Code 03894-1569

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358915

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7751.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1811 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAHAM, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2306 TWIN LAKES CIRCLE
 City JACKSON State MS Zip Code 39211-6757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378492
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GRAHAM, RANDAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 EDGEHILL RD.
 City SALINA State KS Zip Code 67401-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MORTGAGE COMPANY Occupation (for Individual) MORTGAGE BANKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 259.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353714
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRAHAM, RANDAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 EDGEHILL RD.
 City SALINA State KS Zip Code 67401-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MORTGAGE COMPANY Occupation (for Individual) MORTGAGE BANKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 259.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415636
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1812 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAHAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 BRENTWOOD DRIVE
 City PLEASANTVILLE State NY Zip Code 10570-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353748
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. GRAHAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 BRENTWOOD DRIVE
 City PLEASANTVILLE State NY Zip Code 10570-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.380055
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. GRAHAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 BRENTWOOD DRIVE
 City PLEASANTVILLE State NY Zip Code 10570-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.380056
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1813 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAHAM, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9017 SHEARWATER ROAD
 City BLAINE State WA Zip Code 98230-5705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392649
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. GRAHAM, THOMAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 THE TRILLIUM
 City PITTSBURGH State PA Zip Code 15238-1930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358601
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GRAHAM, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 6167
 City CAREFREE State AZ Zip Code 85377-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370771
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1814 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAHAM, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 6167
 City CAREFREE State AZ Zip Code 85377-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2016
Transaction ID : SA11A.393738
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GRAHAM, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 6167
 City CAREFREE State AZ Zip Code 85377-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2016
Transaction ID : SA11A.393739
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GRAHAM, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 6167
 City CAREFREE State AZ Zip Code 85377-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403073
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1815 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAHAM, WILLIAM, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1792 WARWICK RD
 City SAN MARINO State CA Zip Code 91108-2505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365813
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRAHAM, WILLIAM, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1792 WARWICK RD
 City SAN MARINO State CA Zip Code 91108-2505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388333
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRAHAM, WILLIAM, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1792 WARWICK RD
 City SAN MARINO State CA Zip Code 91108-2505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415752
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1816 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAHAM, WILLIAM, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1792 WARWICK RD
 City SAN MARINO State CA Zip Code 91108-2505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415756
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRAINGER, DAVID, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 PEMBRIDGE DRIVE
 City LAKE FOREST State IL Zip Code 60045-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WW GRAINGER Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.346210
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. GRANARA, FRANK, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 SHRINE ROAD
 City NORWELL State MA Zip Code 02061-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIC INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.353021
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1817 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRANATH, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 LONG NECK POINT RD
 City DARIEN State CT Zip Code 06820-5816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.401025
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRANATH, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 LONG NECK POINT RD
 City DARIEN State CT Zip Code 06820-5816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413977
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRANATH, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 LONG NECK POINT RD
 City DARIEN State CT Zip Code 06820-5816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413978
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1818 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRANADILLO, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7218 TORY LN
 City NAPLES State FL Zip Code 34108-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344293
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRANADILLO, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7218 TORY LN
 City NAPLES State FL Zip Code 34108-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370900
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRANADILLO, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7218 TORY LN
 City NAPLES State FL Zip Code 34108-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386614
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1819 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRANADILLO, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7218 TORY LN
 City NAPLES State FL Zip Code 34108-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402852
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRANT, ABIGAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9230 WISTER DRIVE
 City LA MESA State CA Zip Code 91941-4138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370644
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRANT, ABIGAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9230 WISTER DRIVE
 City LA MESA State CA Zip Code 91941-4138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370645
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1820 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GRANT, ABIGAIL, , ,

Mailing Address **9230 WISTER DRIVE**

City LA MESA	State CA	Zip Code 91941-4138
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.404469

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GRANT, CHRISTOPHER, , ,

Mailing Address **1250 CONNECTICUT AVE., NW
STE. 200**

City WASHINGTON	State DC	Zip Code 20036-2643
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 25 / 2016

Transaction ID : SA11A.408550

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GRANT, RICHARD, , ,

Mailing Address **881 S GRAND AVENUE**

City PASADENA	State CA	Zip Code 91105-2862
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAN MURPHY FOUNDATION	Occupation (for Individual) EXECUTIVE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 02 / 2016

Transaction ID : SA11A.360038

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1821 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GRAVES, CAROLYN, , ,

Mailing Address 3001 WESTMORELAND RD.

City RED OAK State TX Zip Code 75154-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362256

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GRAVELINE, R., BRYAN, ,

Mailing Address 3008 EVERGREEN CIRCLE

City AMES State IA Zip Code 50014-4516

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCFARLAND CLINIC Occupation (for Individual) PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.360274

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GRAY, DOROTHY, , ,

Mailing Address 1881 N NASH STREET, UNIT 2101 #2101

City ARLINGTON State VA Zip Code 22209-1572

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364258

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1822 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAY, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WESTLAKE DRIVE

City AUSTIN	State TX	Zip Code 78746-5305
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TWO HILLS STUDIO INC	Occupation (for Individual) BUSINESS MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
662.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382648

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GRAY, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WESTLAKE DRIVE

City AUSTIN	State TX	Zip Code 78746-5305
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TWO HILLS STUDIO INC	Occupation (for Individual) BUSINESS MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
662.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399292

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GRAY, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WESTLAKE DRIVE

City AUSTIN	State TX	Zip Code 78746-5305
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TWO HILLS STUDIO INC	Occupation (for Individual) BUSINESS MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
662.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409442

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1823 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409444
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410795
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410796
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1824 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410804
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GRAY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WESTLAKE DRIVE
 City AUSTIN State TX Zip Code 78746-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO HILLS STUDIO INC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410807
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GRAY, RODGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 E ABO DRIVE
 City HOBBS State NM Zip Code 88240-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392648
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1825 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAY, RODGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BX 2550
 City HOBBS State NM Zip Code 88241-2550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397100
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GRAY JR, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 MEADVILLE STREET
 City EXCELSIOR State MN Zip Code 55331-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420270
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GRAY, RUSSELL, J., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 MEADVILLE STREET
 City EXCELSIOR State MN Zip Code 55331-8790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385646
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1826 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRAYSON, ELLISON, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 PARADISE DRIVE

City TIBURON	State CA	Zip Code 94920-2536
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : SA11A.392756

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. GRAZIANO, SALVATORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 171 LAKE RIDGE RD

City SOUTHBURY	State CT	Zip Code 06488-4161
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DENTAL CARE ALLIANCE	Occupation (for Individual) DENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2016

Transaction ID : SA11A.384689

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GRAZIANO, SALVATORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 171 LAKE RIDGE RD

City SOUTHBURY	State CT	Zip Code 06488-4161
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DENTAL CARE ALLIANCE	Occupation (for Individual) DENTIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2016

Transaction ID : SA11A.401149

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1827 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8510 GREAVES LN.
 City SCHERTZ State TX Zip Code 78154-6221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSR, INC. Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349467
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GREAVES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8510 GREAVES LN.
 City SCHERTZ State TX Zip Code 78154-6221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSR, INC. Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374691
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GREAVES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8510 GREAVES LN.
 City SCHERTZ State TX Zip Code 78154-6221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSR, INC. Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399686
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1828 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8510 GREAVES LN.
 City SCHERTZ State TX Zip Code 78154-6221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSR, INC. Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411380
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GREAVES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8510 GREAVES LN.
 City SCHERTZ State TX Zip Code 78154-6221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSR, INC. Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411383
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GREAVES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8510 GREAVES LN.
 City SCHERTZ State TX Zip Code 78154-6221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSR, INC. Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411384
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1829 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9232 SE ELDORADO WAY

City HOBE SOUND	State FL	Zip Code 33455-8924
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARR COMPANIES	Occupation (for Individual) SR. LOSS CONTROL CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353489

Amount of Each Receipt this Period
90.00

Memo Item CONTRIBUTION

B. GREAVES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9232 SE ELDORADO WAY

City HOBE SOUND	State FL	Zip Code 33455-8924
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARR COMPANIES	Occupation (for Individual) SR. LOSS CONTROL CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358154

Amount of Each Receipt this Period
90.00

Memo Item CONTRIBUTION

C. GREAVES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9232 SE ELDORADO WAY

City HOBE SOUND	State FL	Zip Code 33455-8924
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STARR COMPANIES	Occupation (for Individual) SR. LOSS CONTROL CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382441

Amount of Each Receipt this Period
90.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1830 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9232 SE ELDORADO WAY
 City HOBE SOUND State FL Zip Code 33455-8924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARR COMPANIES Occupation (for Individual) SR. LOSS CONTROL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416099
 Amount of Each Receipt this Period 90.00
 Memo Item CONTRIBUTION

B. GREAVES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3825 PARKLAND DR.
 City FAIRFAX State VA Zip Code 22033-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348602
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GREAVES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3825 PARKLAND DR.
 City FAIRFAX State VA Zip Code 22033-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348609
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1831 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3825 PARKLAND DR.
 City FAIRFAX State VA Zip Code 22033-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376386
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GREAVES, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3825 PARKLAND DR.
 City FAIRFAX State VA Zip Code 22033-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399489
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349575
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1832 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.354808
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357500
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362367
 Amount of Each Receipt this Period
 75.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1833 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368796
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383649
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389148
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1834 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394542
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398652
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399510
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1835 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399511
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405770
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GREAVES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8851N BAYSIDE DR
 City BAYSIDE State WI Zip Code 53217-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABPM Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2975.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415407
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1836 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349142
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362583
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376321
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1837 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396910
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399817
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408305
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1838 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRECO, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7307 SHARP AVE
 City ST LOUIS State MO Zip Code 63116-3039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415443
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GRECO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 PINE HILL RD
 City HOLLIS State NH Zip Code 03049-5939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.402962
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRECO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 PINE HILL RD
 City HOLLIS State NH Zip Code 03049-5939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.402980
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1839 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRECO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 PINE HILL RD
 City HOLLIS State NH Zip Code 03049-5939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402985
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GREENE, DON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6640 RIATA DR
 City REDDING State CA Zip Code 96002-9726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354869
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREENE, DON, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6640 RIATA DR
 City REDDING State CA Zip Code 96002-9726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375741
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1840 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENE, DON, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6640 RIATA DR

City REDDING	State CA	Zip Code 96002-9726
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2016

Transaction ID : SA11A.384227

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GREENE, DON, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6640 RIATA DR

City REDDING	State CA	Zip Code 96002-9726
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.404237

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GREENWALD, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 996 TOWNLINE 17 ROAD

City BENTLEY	State MI	Zip Code 48613-9500
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.409671

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1841 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENBERG, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 SPRINGSIDE ROAD
 City LONGWOOD State FL Zip Code 32779-4985
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376692
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GREEN, JAMES, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6380 PLEASANT VIEW CV
 City CHANHASSEN State MN Zip Code 55317-9263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389853
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. GREEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4558 ALVEO ROAD
 City LA CANADA FLINTRID State CA Zip Code 91011-3703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360995
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1842 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 TURNBERRY COURT
 City OXFORD State MS Zip Code 38655-2578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROSSROADS STRATEGIES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.377448
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. GREEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 71474
 City LOS ANGELES State CA Zip Code 91011-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386107
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. GREEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1973 PENFOLD WAY
 City BALDWINSVILLE State NY Zip Code 13027-8710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BSE RECYCLING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.405141
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1843 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENWOOD, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1087 STATE HIGHWAY 310

City CANTON	State NY	Zip Code 13617-3378
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2016

Transaction ID : SA11A.370919

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. GREENE, LEIGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7518 WEST C AVENUE

City KALAMAZOO	State MI	Zip Code 49009-8838
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL MAIL SERV., INC	Occupation (for Individual) PRINCIPAL/CFO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2016

Transaction ID : SA11A.345860

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

C. GREENE, LEIGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7518 WEST C AVENUE

City KALAMAZOO	State MI	Zip Code 49009-8838
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL MAIL SERV., INC	Occupation (for Individual) PRINCIPAL/CFO
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : SA11A.350085

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1181.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1844 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENE, LEIGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7518 WEST C AVENUE

City KALAMAZOO	State MI	Zip Code 49009-8838
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL MAIL SERV., INC	Occupation (for Individual) PRINCIPAL/CFO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359169

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GREENE, LEIGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7518 WEST C AVENUE

City KALAMAZOO	State MI	Zip Code 49009-8838
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL MAIL SERV., INC	Occupation (for Individual) PRINCIPAL/CFO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368227

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GREENE, LEIGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7518 WEST C AVENUE

City KALAMAZOO	State MI	Zip Code 49009-8838
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTERNATIONAL MAIL SERV., INC	Occupation (for Individual) PRINCIPAL/CFO
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
431.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382222

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1845 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENE, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7518 WEST C AVENUE
 City KALAMAZOO State MI Zip Code 49009-8838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL MAIL SERV., INC Occupation (for Individual) PRINCIPAL/CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396622
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386580
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386583
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1846 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394085
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394089
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398256
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1847 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398263
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398267
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418948
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1848 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 JOHNSTON STREET
 City MOBILE State AL Zip Code 36611-1850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418951
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GREENWOOD, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1427 BUCKWOOD DRIVE
 City ORLANDO State FL Zip Code 32806-7037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RHEUMATOLOGY ASSOCIATES OF CENTRAL FLO Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413528
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GREEN, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 AUBREY LANE
 City NEW HOME State TX Zip Code 79381-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359936
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1849 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 AUBREY LANE

City NEW HOME	State TX	Zip Code 79381-2345
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384737

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. GREEN, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 AUBREY LANE

City NEW HOME	State TX	Zip Code 79381-2345
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419645

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. GREENBERG, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15183 BROLIO WAY

City NAPLES	State FL	Zip Code 34110-2719
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2016

Transaction ID : SA11A.345189

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1118.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1850 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENBERG , PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 POLO COURT
 City SUFFERN State NY Zip Code 10901-3966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEAK ORGANIZATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406209
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GREEN, RINEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4316 ESTES
 City NASHVILLE State TN Zip Code 37215-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASS BERRY & SIMS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399318
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. GREENBERG, SANDRA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 BRIGHTON WAY #3 APT. 3N
 City CLAYTON State MO Zip Code 63105-1679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROOKVIEW MANAGMENT Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387681
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3150.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1851 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREER, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4310 DUNLAVY ST
 150
 City HOUSTON State TX Zip Code 77006-5292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCKINSEY & COMPANY Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355336
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350124
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350125
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1852 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
548.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354526

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
548.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357269

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

C. GREGOR, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 COVENTRY

City NEWPORT BEACH	State CA	Zip Code 92660-6809
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREGOR AND CO AAC	Occupation (for Individual) OFFICE MGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
548.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357274

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	63.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1853 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357275
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357276
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376149
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1854 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382216
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382218
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382223
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1855 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382226
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391780
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391781
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1856 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 COVENTRY
 City NEWPORT BEACH State CA Zip Code 92660-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREGOR AND CO AAC Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400871
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GREGOIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POBOX1349
 City RANCHO SANTA FE State CA Zip Code 92067-1349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365866
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GREN, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5266 RIDGEVALE WAY
 City PLEASANTON State CA Zip Code 94566-5425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349637
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1857 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREN, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5266 RIDGEVALE WAY

City PLEASANTON	State CA	Zip Code 94566-5425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.363072

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GREN, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5266 RIDGEVALE WAY

City PLEASANTON	State CA	Zip Code 94566-5425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380842

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GREN, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5266 RIDGEVALE WAY

City PLEASANTON	State CA	Zip Code 94566-5425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
257.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400012

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1858 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GREN, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5266 RIDGEVALE WAY
 City PLEASANTON State CA Zip Code 94566-5425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403383
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GREN, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5266 RIDGEVALE WAY
 City PLEASANTON State CA Zip Code 94566-5425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403391
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GREN, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5266 RIDGEVALE WAY
 City PLEASANTON State CA Zip Code 94566-5425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412814
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1859 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREN, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5266 RIDGEVALE WAY

City PLEASANTON	State CA	Zip Code 94566-5425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417782

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GREN, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5266 RIDGEVALE WAY

City PLEASANTON	State CA	Zip Code 94566-5425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417813

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GRESSER, WILLIAM, P., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8216 N 18TH ST

City PHOENIX	State AZ	Zip Code 85020-3915
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRESSER ENTERPRISES	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.383566

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1860 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREULICH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1327 SAVANNAH LN.

City CARLSBAD	State CA	Zip Code 92011-4855
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.354827

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GREULICH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1327 SAVANNAH LN.

City CARLSBAD	State CA	Zip Code 92011-4855
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : SA11A.375728

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GREULICH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1327 SAVANNAH LN.

City CARLSBAD	State CA	Zip Code 92011-4855
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391176

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1861 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394239
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394241
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.404230
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1862 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419958
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419960
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GREULICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 SAVANNAH LN.
 City CARLSBAD State CA Zip Code 92011-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419969
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1863 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRICUS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 UNION STREET
 City JAMESTOWN State RI Zip Code 02835-1217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373479
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GRIFFITHS, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 PENN WOODS DRIVE
 City IRWIN State PA Zip Code 15642-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POWER PIPING COMPANY Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380802
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. GRIFFITHS, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 PENN WOODS DRIVE
 City IRWIN State PA Zip Code 15642-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POWER PIPING COMPANY Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380807
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1864 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFITHS, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 PENN WOODS DRIVE

City IRWIN	State PA	Zip Code 15642-9434
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POWER PIPING COMPANY	Occupation (for Individual) CONTROLLER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403708

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GRIFFITHS, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 PENN WOODS DRIVE

City IRWIN	State PA	Zip Code 15642-9434
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POWER PIPING COMPANY	Occupation (for Individual) CONTROLLER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403710

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. GRIFFITHS, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 PENN WOODS DRIVE

City IRWIN	State PA	Zip Code 15642-9434
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POWER PIPING COMPANY	Occupation (for Individual) CONTROLLER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403774

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1865 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFITHS, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 PENN WOODS DRIVE
 City IRWIN State PA Zip Code 15642-9434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POWER PIPING COMPANY Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403790
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GRIFFIN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 727 LARI DAWN
 City SAN ANTONIO State TX Zip Code 78258-4007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUNDAGE MGT CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396971
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GRIFFIN, PETER, BAKEWELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 WINDABOUT DR
 City GREENWICH State CT Zip Code 06831-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387890
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1866 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, PETER, BAKEWELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 WINDABOUT DR
 City GREENWICH State CT Zip Code 06831-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390984
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GRIFFIN, PETER, BAKEWELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 WINDABOUT DR
 City GREENWICH State CT Zip Code 06831-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390986
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GRIFFIN, PETER, BAKEWELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 WINDABOUT DR
 City GREENWICH State CT Zip Code 06831-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399362
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1867 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, PETER, BAKEWELL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8 WINDABOUT DR

City GREENWICH	State CT	Zip Code 06831-3702
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016
Transaction ID : SA11A.410141

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GRIFFIN, PETER, BAKEWELL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8 WINDABOUT DR

City GREENWICH	State CT	Zip Code 06831-3702
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016
Transaction ID : SA11A.418886

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GRIFFIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 41 BELLEGARDE DRIVE

City LITTLE ROCK	State AR	Zip Code 72223-9182
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016
Transaction ID : SA11A.359293

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1868 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 BELLEGARDE DRIVE
 City LITTLE ROCK State AR Zip Code 72223-9182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383786
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GRIFFIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 BELLEGARDE DRIVE
 City LITTLE ROCK State AR Zip Code 72223-9182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383797
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRIFFIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 BELLEGARDE DRIVE
 City LITTLE ROCK State AR Zip Code 72223-9182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419939
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1869 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 BELLEGARDE DRIVE
 City LITTLE ROCK State AR Zip Code 72223-9182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419940
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRIFFY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 LONG CANYON COURT
 City RICHARDSON State TX Zip Code 75080-2669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349304
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GRIFFIN, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5213 HAYNES STERCHI RD.
 City KNOXVILLE State TN Zip Code 37912-2816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352570
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1870 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRIFFIN, WALTER, , ,

Mailing Address **5213 HAYNES STERCHI RD.**

City **KNOXVILLE** State **TN** Zip Code **37912-2816**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.422444

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRIFFIN, WALTER, , ,

Mailing Address **5213 HAYNES STERCHI RD.**

City **KNOXVILLE** State **TN** Zip Code **37912-2816**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.422451

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRIFFIN, Z., , ,

Mailing Address **10250 CONSTELLATION BLVD, STE 2600**
STE 2600

City **LOS ANGELES** State **CA** Zip Code **90067-6240**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1664.00**

Date of Receipt
08 / 09 / 2016

Transaction ID : SA11A.363801

Amount of Each Receipt this Period
133.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **333.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1871 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIFFIN, Z., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10250 CONSTELLATION BLVD, STE 2600
 STE 2600
 City LOS ANGELES State CA Zip Code 90067-6240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382069
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRIFFIN, Z., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10250 CONSTELLATION BLVD, STE 2600
 STE 2600
 City LOS ANGELES State CA Zip Code 90067-6240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390691
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GRIFFIN, Z., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10250 CONSTELLATION BLVD, STE 2600
 STE 2600
 City LOS ANGELES State CA Zip Code 90067-6240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409735
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1872 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GRIFFIN, Z., , ,			Date of Receipt MM / DD / YYYY 09 / 25 / 2016 Transaction ID : SA11A.411699		
Mailing Address 10250 CONSTELLATION BLVD, STE 2600 STE 2600			Amount of Each Receipt this Period 250.00		
City LOS ANGELES	State CA	Zip Code 90067-6240	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1664.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GRIFFIN, Z., , ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2016 Transaction ID : SA11A.412630		
Mailing Address 10250 CONSTELLATION BLVD, STE 2600 STE 2600			Amount of Each Receipt this Period 100.00		
City LOS ANGELES	State CA	Zip Code 90067-6240	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1664.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GRIGEREK, LINDA, , ,			Date of Receipt MM / DD / YYYY 09 / 27 / 2016 Transaction ID : SA11A.411240		
Mailing Address 6600 COLONY DRIVE S			Amount of Each Receipt this Period 250.00		
City ST PETERSBURG	State FL	Zip Code 33705-5903	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) COMPANIONS AND HOMEMAKERS		Occupation (for Individual) BUSINESS OWNER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1873 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIGGS, JAMES, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 WASHINGTON STREET S
 City SALEM State OR Zip Code 97302-5147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAALFELD GRIGGS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395818
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. GRIGGS, MARCUS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 GRIGGS LANE
 City ORONDO State WA Zip Code 98843-9611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361204
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GRIGGS, MARCUS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 GRIGGS LANE
 City ORONDO State WA Zip Code 98843-9611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389784
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1874 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIMES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5422 ECHOLS AVE
 City ALEXANDRIA State VA Zip Code 22311-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.351035
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRIMES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5422 ECHOLS AVE
 City ALEXANDRIA State VA Zip Code 22311-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394149
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GRIMES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5422 ECHOLS AVE
 City ALEXANDRIA State VA Zip Code 22311-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394157
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1875 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GRIMES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5422 ECHOLS AVE
 City ALEXANDRIA State VA Zip Code 22311-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422292
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GRIMES, RUSSELL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 BRIER STREET
 City KENILWORTH State IL Zip Code 60043-1059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377901
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GRISETO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BRADBURY LN.
 City GENEVA State IL Zip Code 60134-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378851
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1876 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRISETO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BRADBURY LN.
 City GENEVA State IL Zip Code 60134-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386906
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GRISETO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BRADBURY LN.
 City GENEVA State IL Zip Code 60134-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386962
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GRISETO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BRADBURY LN.
 City GENEVA State IL Zip Code 60134-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386969
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1877 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRISETO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 524 BRADBURY LN.

City GENEVA	State IL	Zip Code 60134-3644
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.409012

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GRISETO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 524 BRADBURY LN.

City GENEVA	State IL	Zip Code 60134-3644
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414972

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GRISHAM, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 MILL CREEK DRIVE

City BOARDMAN	State OH	Zip Code 44512-1402
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364954

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1878 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRISWOLD, LEONIE, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 977 WHITE POINT RD

City FRIDAY HARBOR	State WA	Zip Code 98250-9184
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387736

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GRISWOLD, LEONIE, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 977 WHITE POINT RD

City FRIDAY HARBOR	State WA	Zip Code 98250-9184
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414156

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. GROBER, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 JOHN STREET

City SELKIRK	State NY	Zip Code 12158-1729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C.	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353387

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1879 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROBER, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 JOHN STREET

City SELKIRK	State NY	Zip Code 12158-1729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C.	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353394

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. GROBER, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 JOHN STREET

City SELKIRK	State NY	Zip Code 12158-1729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C.	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353396

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GROBER, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 JOHN STREET

City SELKIRK	State NY	Zip Code 12158-1729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C.	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372676

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1880 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROBER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 JOHN STREET
 City SELKIRK State NY Zip Code 12158-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C. Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384261
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GROBER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 JOHN STREET
 City SELKIRK State NY Zip Code 12158-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C. Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384283
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GROBER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 JOHN STREET
 City SELKIRK State NY Zip Code 12158-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C. Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384286
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1881 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROBER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 JOHN STREET
 City SELKIRK State NY Zip Code 12158-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELAWARE ENGINEERING, D.P.C. Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398575
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GROEN, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 329 CONCORD SQUARE
 City GURNEE State IL Zip Code 60031-3207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364197
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GROOM, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 N. JEFFERSON STREET
 City ARLINGTON State VA Zip Code 22207-1374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372331
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1882 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROSS, DIETRICH, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 769 MICHIGAN AVE

City WILMETTE	State IL	Zip Code 60091-1956
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JUPITER OXYGEN	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354421

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. GROSS, DIETRICH, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 769 MICHIGAN AVE

City WILMETTE	State IL	Zip Code 60091-1956
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JUPITER OXYGEN	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.381565

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. GROSS, JERRY, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 62 WATERFORD BEND

City THE WOODLANDS	State TX	Zip Code 77381-6611
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.366342

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	27550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1883 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROSS, JERRY, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 WATERFORD BEND
 City THE WOODLANDS State TX Zip Code 77381-6611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417437
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GROSSNICKLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4111 LAKE ST
 City BURLINGTON State WI Zip Code 53105-7724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351094
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GROSSNICKLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4111 LAKE ST
 City BURLINGTON State WI Zip Code 53105-7724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409328
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1884 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROSSKOPF, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 N. WATER STREET
SUITE 950

City MILWAUKEE State WI Zip Code 53202-6669

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEW RESOURCES CONSULTING Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
07 / 14 / 2016
Transaction ID : SA11A.347551

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GROSSKOPF, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 N. WATER STREET
SUITE 950

City MILWAUKEE State WI Zip Code 53202-6669

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEW RESOURCES CONSULTING Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.365158

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. GROSS, WALTER, L., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 559 S FORBS ROAD

City LEXINGTON State KY Zip Code 40504-1149

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEPSI COLA BOTTLERS INC Occupation (for Individual) SR. VP GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
09 / 06 / 2016
Transaction ID : SA11A.389399

Amount of Each Receipt this Period
2700.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1885 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROTHE, ROBERT, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N210 25TH DR
 City NESHKORO State WI Zip Code 54960-6202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398385
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GROTHE, ROBERT, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N210 25TH DR
 City NESHKORO State WI Zip Code 54960-6202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409976
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GROTHE, ROBERT, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N210 25TH DR
 City NESHKORO State WI Zip Code 54960-6202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409979
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1886 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROTHE, ROBERT, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N210 25TH DR
 City NESHKORO State WI Zip Code 54960-6202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409987
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GROTHE, ROBERT, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N210 25TH DR
 City NESHKORO State WI Zip Code 54960-6202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409990
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GROVES, BUTCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 CALVERT DR
 City GALLATIN State TN Zip Code 37066-5401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL MAINTENANCE CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351034
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1887 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. GROVES, BUTCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 CALVERT DR
 City GALLATIN State TN Zip Code 37066-5401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL MAINTENANCE CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409516
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GRUBB, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8576 NIWOT MEADOW FARM RD
 City LONGMONT State CO Zip Code 80503-6491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERT J GRUBB Occupation (for Individual) COMPANY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353603
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GRUBER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7131 ST EDMUNDS DRIVE
 City CINCINNATI State OH Zip Code 45230-3879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINCOLN FINANCIAL ADVISORS Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365712
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1888 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRUBER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7131 ST EDMUNDS DRIVE
City CINCINNATI State OH Zip Code 45230-3879
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LINCOLN FINANCIAL ADVISORS Occupation (for Individual) FINANCIAL PLANNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390370
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GRUBER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7131 ST EDMUNDS DRIVE
City CINCINNATI State OH Zip Code 45230-3879
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LINCOLN FINANCIAL ADVISORS Occupation (for Individual) FINANCIAL PLANNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410305
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRUEBNAU, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4977 BATTERY LANE APT 905
City BETHESDA State MD Zip Code 20814-4925
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ICF Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353610
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1889 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRUEBNAU, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4977 BATTERY LANE
 APT 905
 City BETHESDA State MD Zip Code 20814-4925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353617
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GRUEBNAU, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4977 BATTERY LANE
 APT 905
 City BETHESDA State MD Zip Code 20814-4925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358276
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GRUEBNAU, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4977 BATTERY LANE
 APT 905
 City BETHESDA State MD Zip Code 20814-4925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1890 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRUETZMACHER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 951 KAILIU PL

City HONOLULU	State HI	Zip Code 96825-1335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374297

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GRUETZMACHER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 951 KAILIU PL

City HONOLULU	State HI	Zip Code 96825-1335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380150

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. GRUETZMACHER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 951 KAILIU PL

City HONOLULU	State HI	Zip Code 96825-1335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399580

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1891 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRUETZMACHER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 951 KAILIU PL

City HONOLULU	State HI	Zip Code 96825-1335
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403064

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. GRUNDMANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6230 FRANK CHRISTIAN RD

City AZLE	State TX	Zip Code 76020-7303
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349211

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GRUNDMANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6230 FRANK CHRISTIAN RD

City AZLE	State TX	Zip Code 76020-7303
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384308

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1892 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRUSS, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4400 VALLEY INDUSTRIAL BOULEVARD N
City SHAKOPEE State MN Zip Code 55379-1859
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FREMONT INC Occupation (for Individual) CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348117
Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. GUADIANA, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 146 LEROY AVENUE
City DARIEN State CT Zip Code 06820-3436
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) TORYS LLP Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386761
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GUAJARDO, RUBEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 598 JUBAL EARLY LN.
City CONROE State TX Zip Code 77302-8409
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MASONRY CONTRACTOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402512
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1893 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUARISCO, FRANK, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 579

City PATTERSON	State LA	Zip Code 70392-0579
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANKS AGENCY	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354903

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. GUARISCO, FRANK, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 579

City PATTERSON	State LA	Zip Code 70392-0579
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANKS AGENCY	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.361420

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. GUARISCO, FRANK, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 579

City PATTERSON	State LA	Zip Code 70392-0579
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANKS AGENCY	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.373761

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1894 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUARISCO, FRANK, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 579
 City PATTERSON State LA Zip Code 70392-0579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANKS AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381088
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. GUARISCO, FRANK, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 579
 City PATTERSON State LA Zip Code 70392-0579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANKS AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406700
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. GUARISCO, FRANK, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 579
 City PATTERSON State LA Zip Code 70392-0579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANKS AGENCY Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414567
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1895 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLAND PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358323
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLAND PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370013
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLAND PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382467
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1896 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLAND PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397555
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GUASTAVINO JR, RAFAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23050 COLONEL LEONARD RD
 City ROCK HALL State MD Zip Code 21661-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLAND PT FARM Occupation (for Individual) FARM MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416141
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GUAY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 BIRCH ROAD
 City BLOOMFIELD State CT Zip Code 06002-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING ECONOMIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410939
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1897 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUCKERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 NIGHTINGALE DR.
 City CHESTER State VA Zip Code 23836-2600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372784
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GUERDON, JAMES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5169 SW 27TH DRIVE
 City GAINESVILLE State FL Zip Code 32608-3980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.379037
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GUERDON, JAMES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5169 SW 27TH DRIVE
 City GAINESVILLE State FL Zip Code 32608-3980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390331
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1898 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUERDON, JAMES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5169 SW 27TH DRIVE
 City Gainesville State FL Zip Code 32608-3980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408628
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GUERRIERO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 MEADOW CT
 City Southlake State TX Zip Code 76092-8341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374625
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GUERRIERO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 MEADOW CT
 City Southlake State TX Zip Code 76092-8341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374627
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1899 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUERRIERO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1003 MEADOW CT

City SOUTHLAKE	State TX	Zip Code 76092-8341
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389665

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. GUERRIERO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1003 MEADOW CT

City SOUTHLAKE	State TX	Zip Code 76092-8341
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399663

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. GUERRIERO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1003 MEADOW CT

City SOUTHLAKE	State TX	Zip Code 76092-8341
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403581

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUERRA JR, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 JAMES WAY
 City ADVANCE State NC Zip Code 27006-8517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392114
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GUERRA JR, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 JAMES WAY
 City ADVANCE State NC Zip Code 27006-8517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413846
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. GUERRA JR, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 JAMES WAY
 City ADVANCE State NC Zip Code 27006-8517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413848
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUILBERT, ANDRE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 REDWOOD ROAD
 City NORWALK State CT Zip Code 06851-3227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364314
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GUILBERT, ANDRE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 REDWOOD ROAD
 City NORWALK State CT Zip Code 06851-3227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392428
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GUILLES, KAY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 M STREET SW
 City WASHINGTON State DC Zip Code 20024-4002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBRARY OF CONGRESS Occupation (for Individual) LIBRARIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362875
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1902 OF 5722
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUILLAUME, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 ROBERTS ROAD
 City INVERNESS State IL Zip Code 60067-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348782
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GUINDON, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 WHARF RD
 City GALVESTON State TX Zip Code 77550-1652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KATIE'S SEAFOOD Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.346057
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. GULLQUIST, HERBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 COCONUT PALM ROAD
 City VERO BEACH State FL Zip Code 32963-3711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398467
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	35050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1903 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUNDERSEN, ARNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9940 HART ROAD SE
 City OLYMPIA State WA Zip Code 98501-9739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUNDERSEN DENTAL Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408538
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GUNDERSON, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 STARLIGHT ISLE
 City LADERA RANCH State CA Zip Code 92694-1467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSM AUTO GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411735
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GUNLICK, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10050 INNOVATION DR.
 City MIAMISBURG State OH Zip Code 45342-4931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356344
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1904 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GUNLOCK, GLENN, , ,

Mailing Address 19 CEDAR WAX WING RD

City HILTON HEAD ISLAND State SC Zip Code 29928-5616

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2016
Transaction ID : SA11A.410184

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GUNTER, KAY, , ,

Mailing Address 420 BURCH LANE

City BOYCE State VA Zip Code 22620-2831

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2016
Transaction ID : SA11A.366061

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GUNTHER, DON, , ,

Mailing Address 150 MOORINGS PARK DRIVE, APT 303

City NAPLES State FL Zip Code 34105-2119

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016
Transaction ID : SA11A.391616

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1905 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355316
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357656
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358988
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1906 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387838
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405953
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405979
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1907 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUPTA, VED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODGATE LANE
 City BRYN MAWR State PA Zip Code 19010-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405982
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GUPTILL, WILLIAM, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2573 SAN ANDRES WAY
 City CLAREMONT State CA Zip Code 91711-1555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401634
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

C. GUPTILL, WILLIAM, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2573 SAN ANDRES WAY
 City CLAREMONT State CA Zip Code 91711-1555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417085
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	277.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1908 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GURECK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3155 MARCUS POINTE BLVD

City PENSACOLA	State FL	Zip Code 32505-1865
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2016

Transaction ID : SA11A.389217

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. GURECK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3155 MARCUS POINTE BLVD

City PENSACOLA	State FL	Zip Code 32505-1865
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411603

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. GURECK, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3155 MARCUS POINTE BLVD

City PENSACOLA	State FL	Zip Code 32505-1865
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418627

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1909 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUSTAFSON, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 EAST VIEW CT.
 City WAUKESHA State WI Zip Code 53188-4449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SETTLER'S CREEK, INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415126
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GUTIERREZ, CARLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 SOUTH STREET NW APT 3C
 City WASHINGTON State DC Zip Code 20007-4455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALBRIGHT STONEBRIDGE GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.380931
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. GUTIERREZ, LEONCIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 TRAVILAH RD
 City POTOMAC State MD Zip Code 20854-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.356445
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1910 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUTIERREZ, LEONCIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12710 TRAVILAH RD

City POTOMAC	State MD	Zip Code 20854-1084
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.356453

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. GUTIERREZ, LEONCIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12710 TRAVILAH RD

City POTOMAC	State MD	Zip Code 20854-1084
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380120

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. GUTIERREZ, LEONCIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12710 TRAVILAH RD

City POTOMAC	State MD	Zip Code 20854-1084
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383926

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1911 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUTIERREZ, LEONCIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 TRAVILAH RD
 City POTOMAC State MD Zip Code 20854-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.398403
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. GUTIERREZ, LEONCIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 TRAVILAH RD
 City POTOMAC State MD Zip Code 20854-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403236
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. GUTIERREZ, LEONCIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 TRAVILAH RD
 City POTOMAC State MD Zip Code 20854-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403921
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1912 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUY, RAYMOND, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2033 MONTROSE LANE
 City WILMINGTON State NC Zip Code 28405-6208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365393
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GUY, RAYMOND, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2033 MONTROSE LANE
 City WILMINGTON State NC Zip Code 28405-6208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397263
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GUZZETTI, LOUIS, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 MAIN ST 27
 City NEW CANAAN State CT Zip Code 06840-5634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPINNAKER COATING, LLC Occupation (for Individual) CHAIRMAN & EO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348857
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1913 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUZZETTI, LOUIS, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 MAIN ST
27

City NEW CANAAN State CT Zip Code 06840-5634

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPINNAKER COATING, LLC Occupation (for Individual) CHAIRMAN & EO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 19 / 2016**

Transaction ID : SA11A.351066

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. GUZZETTI, LOUIS, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 MAIN ST
27

City NEW CANAAN State CT Zip Code 06840-5634

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPINNAKER COATING, LLC Occupation (for Individual) CHAIRMAN & EO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 24 / 2016**

Transaction ID : SA11A.380131

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. GUZZETTI, LOUIS, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 MAIN ST
27

City NEW CANAAN State CT Zip Code 06840-5634

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPINNAKER COATING, LLC Occupation (for Individual) CHAIRMAN & EO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 29 / 2016**

Transaction ID : SA11A.415166

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1914 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GWILLIAM, JANET, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 E. WILFORD AVENUE
 City MURRAY State UT Zip Code 84107-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 17 / 2016
Transaction ID : SA11A.349017
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GWILLIAM, JANET, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 E. WILFORD AVENUE
 City MURRAY State UT Zip Code 84107-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357190
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GWILLIAM, JANET, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 E. WILFORD AVENUE
 City MURRAY State UT Zip Code 84107-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359775
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1915 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GWILLIAM, JANET, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 E. WILFORD AVENUE
 City MURRAY State UT Zip Code 84107-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370533
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GWILLIAM, JANET, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 E. WILFORD AVENUE
 City MURRAY State UT Zip Code 84107-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378986
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. GWILLIAM, JANET, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 E. WILFORD AVENUE
 City MURRAY State UT Zip Code 84107-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388116
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1916 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GWILLIAM, JANET, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 E. WILFORD AVENUE
 City MURRAY State UT Zip Code 84107-7410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400202
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GYOREY, GEZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19941 WINTER LN
 City SARATOGA State CA Zip Code 95070-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388870
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HA, ANDREW, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 07 / 02 / 2016
Transaction ID : SA11A.344270
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	307.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1917 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HA, ANDREW, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.345937
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HA, ANDREW, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349531
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HA, ANDREW, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349761
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1918 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HA, ANDREW, K., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2016
Mailing Address 623 BETTY ROSE AVENUE		Transaction ID : SA11A.350711
City GIBBSTOWN	State NJ	Zip Code 08027-1431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 826.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HA, ANDREW, K., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2016
Mailing Address 623 BETTY ROSE AVENUE		Transaction ID : SA11A.359183
City GIBBSTOWN	State NJ	Zip Code 08027-1431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 826.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HA, ANDREW, K., MR.,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 01 / 2016
Mailing Address 623 BETTY ROSE AVENUE		Transaction ID : SA11A.360169
City GIBBSTOWN	State NJ	Zip Code 08027-1431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 826.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1919 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HA, ANDREW, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt
 08 / 03 / 2016
Transaction ID : SA11A.362541
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HA, ANDREW, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt
 08 / 04 / 2016
Transaction ID : SA11A.363129
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HA, ANDREW, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 BETTY ROSE AVENUE
 City GIBBSTOWN State NJ Zip Code 08027-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372687
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1920 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
826.00

Date of Receipt
08 / 24 / 2016

Transaction ID : SA11A.377958

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
826.00

Date of Receipt
08 / 25 / 2016

Transaction ID : SA11A.378283

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City GIBBSTOWN	State NJ	Zip Code 08027-1431
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
826.00

Date of Receipt
08 / 24 / 2016

Transaction ID : SA11A.378724

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1921 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City **GIBBSTOWN** State **NJ** Zip Code **08027-1431**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.385007

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City **GIBBSTOWN** State **NJ** Zip Code **08027-1431**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.385008

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HA, ANDREW, K., MR.,

Mailing Address **623 BETTY ROSE AVENUE**

City **GIBBSTOWN** State **NJ** Zip Code **08027-1431**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **826.00**

Date of Receipt
09 / 18 / 2016
Transaction ID : SA11A.399849

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1922 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HA, ANDREW, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 623 BETTY ROSE AVENUE

City GIBBSTOWN	State NJ	Zip Code 08027-1431
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
826.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416647

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HA, ANDREW, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 623 BETTY ROSE AVENUE

City GIBBSTOWN	State NJ	Zip Code 08027-1431
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
826.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416648

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4008 CAPSTAN PL

City DISCOVERY BAY	State CA	Zip Code 94505-1109
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368504

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1923 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4008 CAPSTAN PL

City DISCOVERY BAY	State CA	Zip Code 94505-1109
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.376400

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4008 CAPSTAN PL

City DISCOVERY BAY	State CA	Zip Code 94505-1109
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2016

Transaction ID : SA11A.383152

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4008 CAPSTAN PL

City DISCOVERY BAY	State CA	Zip Code 94505-1109
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2016

Transaction ID : SA11A.391057

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1924 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4008 CAPSTAN PL

City DISCOVERY BAY	State CA	Zip Code 94505-1109
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.404336

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HAAS, MARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4008 CAPSTAN PL

City DISCOVERY BAY	State CA	Zip Code 94505-1109
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420437

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

C. HAASE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9146 STITT RD.

City WHITEHOUSE	State OH	Zip Code 43571-9761
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359164

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1925 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAASE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9146 STITT RD.

City WHITEHOUSE	State OH	Zip Code 43571-9761
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422171

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HAASE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9146 STITT RD.

City WHITEHOUSE	State OH	Zip Code 43571-9761
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422187

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HABER, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 62 CHESTER ST

City STAMFORD	State CT	Zip Code 06905-3944
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.361900

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1926 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HABERKORN, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 SMITHTOWN ROAD
 City EXCELSIOR State MN Zip Code 55331-8210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348261
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HABIB, AMELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 LEBRUN RD
 City BUFFALO State NY Zip Code 14226-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383548
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HACHERL, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2920 N FORGEUS AVENUE
 City TUCSON State AZ Zip Code 85716-1814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361401
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1927 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HADDOCK, RAYMUND, , ,		Date of Receipt MM / DD / YYYY 07 / 19 / 2016
Mailing Address 287 CENTURY CIRCLE STE 101		Transaction ID : SA11A.349196
City LOUISVILLE	State CO	Zip Code 80027-1684
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT INSURANCE AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HADDOCK, RAYMUND, , ,		Date of Receipt MM / DD / YYYY 08 / 09 / 2016
Mailing Address 287 CENTURY CIRCLE STE 101		Transaction ID : SA11A.363761
City LOUISVILLE	State CO	Zip Code 80027-1684
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT INSURANCE AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HADDOCK, RAYMUND, , ,		Date of Receipt MM / DD / YYYY 08 / 11 / 2016
Mailing Address 287 CENTURY CIRCLE STE 101		Transaction ID : SA11A.364960
City LOUISVILLE	State CO	Zip Code 80027-1684
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT INSURANCE AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1928 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HADDOCK, RAYMUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 287 CENTURY CIRCLE STE 101

City LOUISVILLE	State CO	Zip Code 80027-1684
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11A.381993

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HADDOCK, RAYMUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 287 CENTURY CIRCLE STE 101

City LOUISVILLE	State CO	Zip Code 80027-1684
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11A.411610

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HADDOCK, RAYMUND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 287 CENTURY CIRCLE STE 101

City LOUISVILLE	State CO	Zip Code 80027-1684
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2016

Transaction ID : SA11A.412042

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1929 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HADDOCK, RAYMUND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 287 CENTURY CIRCLE STE 101
 City LOUISVILLE State CO Zip Code 80027-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412048
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HADLEY, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4890 OAK GROVE COURT NE
 City CEDAR RAPIDS State IA Zip Code 52411-6782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360275
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HAFNER, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 FARNHAM PARK DR.
 City HOUSTON State TX Zip Code 77024-7501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422107
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1930 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518
 City MORRILTON State AR Zip Code 72110-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344396
 Amount of Each Receipt this Period 32.00
 Memo Item
 CONTRIBUTION

B. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518
 City MORRILTON State AR Zip Code 72110-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354683
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518
 City MORRILTON State AR Zip Code 72110-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365150
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	82.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1931 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518
 City MORRILTON State AR Zip Code 72110-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.377439
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518
 City MORRILTON State AR Zip Code 72110-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt **09 / 11 / 2016**
Transaction ID : SA11A.393720
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAGANS, BONNIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. B OX 518
 City MORRILTON State AR Zip Code 72110-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.405113
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1932 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HAGANS, BONNIE, J., ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2016
Mailing Address P.O. B OX 518			Transaction ID : SA11A.413266
City MORRILTON	State AR	Zip Code 72110-	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HAGANS, BONNIE, J., ,			Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address P.O. B OX 518			Transaction ID : SA11A.415137
City MORRILTON	State AR	Zip Code 72110-	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HAGAN, LAUREN, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 80 MANOR LN			Transaction ID : SA11A.405919
City YARDLEY	State PA	Zip Code 19067-1800	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SHERIDAN HEALTHCARE		Occupation (for Individual) NURSE ANESTHETIST, PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1933 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGAN, LAUREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 MANOR LN

City YARDLEY	State PA	Zip Code 19067-1800
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHERIDAN HEALTHCARE	Occupation (for Individual) NURSE ANESTHETIST, PT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418779

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HAGAN, LAUREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 MANOR LN

City YARDLEY	State PA	Zip Code 19067-1800
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHERIDAN HEALTHCARE	Occupation (for Individual) NURSE ANESTHETIST, PT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418794

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HAGEMAN, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 WATERFORD CIR.

City THE WOODLANDS	State TX	Zip Code 77381-6645
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370584

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1934 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGEMeyer, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 2ND AVE N
 SUITE 311
 City NASHVILLE State TN Zip Code 37201-1654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGMARK Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359407
 Amount of Each Receipt this Period 2000.00
 Memo Item
 CONTRIBUTION

B. HAGENLOCKER, E., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 LONE PINE ROAD
 City BLOOMFIELD HILLS State MI Zip Code 48304-3543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401677
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365719
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3025.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1935 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365720
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384300
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384304
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1936 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384349
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384350
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390466
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1937 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398026
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398031
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398033
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1938 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGESTAD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14016 ZIPPO WAY
 City HASLET State TX Zip Code 76052-3359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEDGWICK CMS Occupation (for Individual) LITIGATION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415919
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAGGERTY, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4391
 City SANTA CLARA State CA Zip Code 95056-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF SCIENTOLOGY Occupation (for Individual) PASTORAL COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419909
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAGGERTY, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4391
 City SANTA CLARA State CA Zip Code 95056-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF SCIENTOLOGY Occupation (for Individual) PASTORAL COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422030
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1939 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAGGERTY, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4391
 City SANTA CLARA State CA Zip Code 95056-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF SCIENTOLOGY Occupation (for Individual) PASTORAL COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422763
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAGGERTY, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4391
 City SANTA CLARA State CA Zip Code 95056-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHURCH OF SCIENTOLOGY Occupation (for Individual) PASTORAL COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422764
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAGGSTROM, JOHN, A., MR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 S 94TH STREET
 City OMAHA State NE Zip Code 68124-1101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346995
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1940 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAINES, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 917 WALNUT ST

City HOLLIDAYSBURG	State PA	Zip Code 16648-2117
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) S&A HOMES	Occupation (for Individual) AFFORDABLE HOUSING DEVELOPEI
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2016

Transaction ID : SA11A.379117

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. HAINES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76 EDGEHURST COURT

City FLAT ROCK	State NC	Zip Code 28731-8772
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2016

Transaction ID : SA11A.389521

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HAIRE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21432 HERON DRIVE

City BODEGA BAY	State CA	Zip Code 94923-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.349499

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1941 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAIRE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21432 HERON DRIVE

City BODEGA BAY	State CA	Zip Code 94923-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394199

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HAIRE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21432 HERON DRIVE

City BODEGA BAY	State CA	Zip Code 94923-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410344

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HAIRE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21432 HERON DRIVE

City BODEGA BAY	State CA	Zip Code 94923-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410361

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1942 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAIRE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21432 HERON DRIVE

City BODEGA BAY	State CA	Zip Code 94923-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.410362

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 EAST 61ST STREET

City TACOMA	State WA	Zip Code 98404-1224
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : SA11A.348304

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 EAST 61ST STREET

City TACOMA	State WA	Zip Code 98404-1224
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : SA11A.348305

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1943 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 EAST 61ST STREET

City TACOMA	State WA	Zip Code 98404-1224
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.358453

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 EAST 61ST STREET

City TACOMA	State WA	Zip Code 98404-1224
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.375042

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 EAST 61ST STREET

City TACOMA	State WA	Zip Code 98404-1224
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.375046

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1944 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382610
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382611
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382695
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1945 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388042
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388043
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388052
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1946 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388054
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388067
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388068
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1947 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 220 EAST 61ST STREET
City TACOMA State WA Zip Code 98404-1224
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2016
Transaction ID : SA11A.391792
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 220 EAST 61ST STREET
City TACOMA State WA Zip Code 98404-1224
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2016
Transaction ID : SA11A.391794
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HAISLIP, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 220 EAST 61ST STREET
City TACOMA State WA Zip Code 98404-1224
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2016
Transaction ID : SA11A.399991
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1948 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408826
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAISLIP, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 EAST 61ST STREET
 City TACOMA State WA Zip Code 98404-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408827
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HALBACH, VALERIE, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8869 HALVERSON DRIVE
 City ELK GROVE State CA Zip Code 95624-1630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.351850
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1949 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALBACH, VALERIE, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8869 HALVERSON DRIVE

City ELK GROVE	State CA	Zip Code 95624-1630
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.364388

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. HALBACH, VALERIE, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8869 HALVERSON DRIVE

City ELK GROVE	State CA	Zip Code 95624-1630
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
08 / 22 / 2016
Transaction ID : SA11A.375214

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HALBACH, VALERIE, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8869 HALVERSON DRIVE

City ELK GROVE	State CA	Zip Code 95624-1630
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 06 / 2016
Transaction ID : SA11A.389747

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1950 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HALBACH, VALERIE, A., MRS.,

Mailing Address **8869 HALVERSON DRIVE**

City ELK GROVE	State CA	Zip Code 95624-1630
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 16 / 2016

Transaction ID : SA11A.396240

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HALBACH, VALERIE, A., MRS.,

Mailing Address **8869 HALVERSON DRIVE**

City ELK GROVE	State CA	Zip Code 95624-1630
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 22 / 2016

Transaction ID : SA11A.401766

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HALBACH, VALERIE, A., MRS.,

Mailing Address **8869 HALVERSON DRIVE**

City ELK GROVE	State CA	Zip Code 95624-1630
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 26 / 2016

Transaction ID : SA11A.406947

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1951 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALBERSTAM, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5014-16TH AVE
 APT 4R
 City BROOKLYN State NY Zip Code 11204-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DH CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372670
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. HALBERSTAM, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5014-16TH AVE
 APT 4R
 City BROOKLYN State NY Zip Code 11204-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DH CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.416677
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. HALE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 440 RIVER ROAD
 City WESTPORT State MA Zip Code 02790-5185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392891
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1952 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALEY, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 65349

City TACOMA	State WA	Zip Code 98464-1349
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2016

Transaction ID : SA11A.345855

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. HALEY, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 65349

City TACOMA	State WA	Zip Code 98464-1349
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414766

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. HALKIAS, REBECCA, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 C ST NE

City WASHINGTON	State DC	Zip Code 20002-5709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354432

Amount of Each Receipt this Period
2700.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1953 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALL, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1236 DRAKE CT
 City WACO State TX Zip Code 76710-4000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379864
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HALL, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6601 ANOKA ST NE
 City FRIDLEY State MN Zip Code 55432-4722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US BANK Occupation (for Individual) COMPUTERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353423
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. HALL, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6601 ANOKA ST NE
 City FRIDLEY State MN Zip Code 55432-4722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US BANK Occupation (for Individual) COMPUTERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410154
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1954 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALL, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6601 ANOKA ST NE
City FRIDLEY State MN Zip Code 55432-4722
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) US BANK Occupation (for Individual) COMPUTERS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419184
Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. HALL, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1010 WALTHAM STREET APT 493
City LEXINGTON State MA Zip Code 02421-8066
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358779
Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. HALL, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8503 MIAMI AVENUE
City LUBBOCK State TX Zip Code 79423-2907
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373699
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1955 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALL, OLLABELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3603 MEADOW LAKE LANE

City HOUSTON	State TX	Zip Code 77027-4110
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372227

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HALL, OLLABELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3603 MEADOW LAKE LANE

City HOUSTON	State TX	Zip Code 77027-4110
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419725

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HALL, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 205

City POMFRET	State CT	Zip Code 06258-0205
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389449

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1956 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALL, WILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1298 NAVEL PLACE
 City VISTA State CA Zip Code 92081-7435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDEN TRIANGLE LAND SURVEYING INC Occupation (for Individual) LAND SURVEYOR
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419684
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HALLADAY, F. D., , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 ORANGE GROVE TERRACE
 City SOUTH PASADENA State CA Zip Code 91030-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363560
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HALLBERG, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 BEACH ROAD, APT 285
 City VERO BEACH State FL Zip Code 32963-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.348184
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1957 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALLBERG, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 BEACH ROAD, APT 285
 City VERO BEACH State FL Zip Code 32963-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378629
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HALLORAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2260 WHITE OAK DRIVE
 City NORTHBROOK State IL Zip Code 60062-6346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLORAN & FAUCH INC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366349
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HALSEY, BRENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 AMPHILL ROAD
 City RICHMOND State VA Zip Code 23226-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389822
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1958 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALSTED, LEONARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2726 5TH ST APT 253
 City DAVIS State CA Zip Code 95618-7778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10450.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361466
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. HALSTED, LEONARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2726 5TH ST APT 253
 City DAVIS State CA Zip Code 95618-7778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10450.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383514
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. HALVERSON, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1826 STONEBROOK LN
 City CLOVIS State CA Zip Code 93611-5984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349254
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1959 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HALVERSON, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1826 STONEBROOK LN
 City CLOVIS State CA Zip Code 93611-5984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362272
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HALVERSON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26359 OLD SALTWORKS RD
 City ABINGDON State VA Zip Code 24210-9313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.402591
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HALVORSON, ELLING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12515 WILLOWS ROAD NE SUITE 200
 City KIRKLAND State WA Zip Code 98034-8795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONARCH ENTERPRISES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.365901
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1960 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALVORSON, LON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12515 WILLOWS ROAD NE
 200
 City KIRKLAND State WA Zip Code 98034-8759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONARCH ENTERPRISES, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390957
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HALVORSEN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 571897
 City TARZANA State CA Zip Code 91357-1897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415858
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HAMACHEK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 LOWELL AVENUE
 City PALO ALTO State CA Zip Code 94301-3721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359701
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1961 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMACHEK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 LOWELL AVENUE
 City PALO ALTO State CA Zip Code 94301-3721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMADE, RUDAINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6446 CALHOUN
 City DEARBORN State MI Zip Code 48126-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPMS GROUP Occupation (for Individual) CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 07 / 09 / 2016
Transaction ID : SA11A.346596
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMADE, RUDAINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6446 CALHOUN
 City DEARBORN State MI Zip Code 48126-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPMS GROUP Occupation (for Individual) CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362014
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1962 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HAMADE, RUDAINA, , ,

Mailing Address **6446 CALHOUN**

City **DEARBORN** State **MI** Zip Code **48126-2207**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RPMS GROUP** Occupation (for Individual) **CO-FOUNDER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
08 / 03 / 2016

Transaction ID : SA11A.362015

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HAMADE, RUDAINA, , ,

Mailing Address **6446 CALHOUN**

City **DEARBORN** State **MI** Zip Code **48126-2207**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RPMS GROUP** Occupation (for Individual) **CO-FOUNDER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
08 / 09 / 2016

Transaction ID : SA11A.363884

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HAMADE, RUDAINA, , ,

Mailing Address **6446 CALHOUN**

City **DEARBORN** State **MI** Zip Code **48126-2207**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RPMS GROUP** Occupation (for Individual) **CO-FOUNDER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
09 / 09 / 2016

Transaction ID : SA11A.392143

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **400.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1963 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMANAKA, BARBARA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 EAGLE RIDGE DRIVE
 City GALES FERRY State CT Zip Code 06335-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387673
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HAMBRICK, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2009
 City MANCHACA State TX Zip Code 78652-2009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF TEXAS SYSTEM Occupation (for Individual) HIGHER EDUCATION ADMINISTRATI
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353169
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HAMEL SR., ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 PUDDING HILL RD.
 City HAMPTON State CT Zip Code 06247-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 455.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368772
 Amount of Each Receipt this Period 410.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1410.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1964 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, ANDREW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 HANTY BRANCH HILL
 City BREVARD State NC Zip Code 28712-7506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362491
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMILTON, ANDREW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 HANTY BRANCH HILL
 City BREVARD State NC Zip Code 28712-7506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388594
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAMILTON, ANDREW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 HANTY BRANCH HILL
 City BREVARD State NC Zip Code 28712-7506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422562
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1965 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, EARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 PINEY MOUNTAIN DRRVE, UNIT 507
APT 507

City ASHEVILLE State NC Zip Code 28805-1478

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359347

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HAMILTON, EARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 PINEY MOUNTAIN DRRVE, UNIT 507
APT 507

City ASHEVILLE State NC Zip Code 28805-1478

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.369982

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HAMILTON, EARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 PINEY MOUNTAIN DRRVE, UNIT 507
APT 507

City ASHEVILLE State NC Zip Code 28805-1478

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
975.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.390146

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1966 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 PINEY MOUNTAIN DRRVE, UNIT 507
 APT 507
 City ASHEVILLE State NC Zip Code 28805-1478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413348
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMILTON, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 PINEY MOUNTAIN DRRVE, UNIT 507
 APT 507
 City ASHEVILLE State NC Zip Code 28805-1478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417846
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMILTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7762 S. GUTHRIE AVE
 City TULSA State OK Zip Code 74132-2832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST JOHN CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350086
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7762 S. GUTHRIE AVE
 City TULSA State OK Zip Code 74132-2832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST JOHN CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370688
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMILTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7762 S. GUTHRIE AVE
 City TULSA State OK Zip Code 74132-2832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST JOHN CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382869
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMILTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7762 S. GUTHRIE AVE
 City TULSA State OK Zip Code 74132-2832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST JOHN CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385740
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1968 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7762 S. GUTHRIE AVE

City TULSA	State OK	Zip Code 74132-2832
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ST JOHN CLINIC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.401578

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HAMILTON, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7762 S. GUTHRIE AVE

City TULSA	State OK	Zip Code 74132-2832
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ST JOHN CLINIC	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419346

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HAMILTON, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 985 SISKIYOU DRIVE

City MENLO PARK	State CA	Zip Code 94025-7046
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356304

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1969 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMILTON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 985 SISKIYOU DRIVE
 City MENLO PARK State CA Zip Code 94025-7046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383033
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HAMILTON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 985 SISKIYOU DRIVE
 City MENLO PARK State CA Zip Code 94025-7046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411307
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HAMM, EDWARD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 S BEACH ROAD
 City HOBE SOUND State FL Zip Code 33455-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACOMA OIL Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356521
 Amount of Each Receipt this Period
 800.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 900.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1970 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMM, EDWARD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 S BEACH ROAD
 City HOBE SOUND State FL Zip Code 33455-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACOMA OIL Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10600.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377119
 Amount of Each Receipt this Period 9000.00
 Memo Item
 CONTRIBUTION

B. HAMM , GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 AVIATOR DRIVE
 City FT. WORTH State TX Zip Code 76179-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391656
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. HAMM , GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 AVIATOR DRIVE
 City FT. WORTH State TX Zip Code 76179-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399059
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	9075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1971 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMM , GEORGE , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 AVIATOR DRIVE
 City FT. WORTH State TX Zip Code 76179-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399061
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAMM , GEORGE , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 AVIATOR DRIVE
 City FT. WORTH State TX Zip Code 76179-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407651
 Amount of Each Receipt this Period
 38.00
 Memo Item
 CONTRIBUTION

C. HAMM , GEORGE , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 AVIATOR DRIVE
 City FT. WORTH State TX Zip Code 76179-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409203
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 88.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1972 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMM, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 AVIATOR DRIVE
 City FT. WORTH State TX Zip Code 76179-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413400
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAMM, HAROLD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1295
 City OKLAHOMA CITY State OK Zip Code 73101-1295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL RESOURCES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 29600.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346077
 Amount of Each Receipt this Period 14600.00
 Memo Item CONTRIBUTION

C. HAMMER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5240 E CALLE VENTURA
 City PHOENIX State AZ Zip Code 85018-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHAMPION COLLEGE SERVICES Occupation (for Individual) HIGHER EDUCATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354855
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	19650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1973 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMER, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CHANNEL DR
 1101
 City MONMOUTH BEACH State NJ Zip Code 07750-1365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMVAULT Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357258
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HAMMER, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CHANNEL DR
 1101
 City MONMOUTH BEACH State NJ Zip Code 07750-1365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMVAULT Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420459
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HAMMER, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CHANNEL DR
 1101
 City MONMOUTH BEACH State NJ Zip Code 07750-1365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMVAULT Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420462
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1974 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMONS, EDDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4417 79TH
 City LUBBOCK State TX Zip Code 79424-3336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390367
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HAMMONS, EDDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4417 79TH
 City LUBBOCK State TX Zip Code 79424-3336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390368
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HAMMONS, EDDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4417 79TH
 City LUBBOCK State TX Zip Code 79424-3336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407548
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1975 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 07 / 02 / 2016
Transaction ID : SA11A.344251
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 07 / 02 / 2016
Transaction ID : SA11A.344252
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 07 / 02 / 2016
Transaction ID : SA11A.344253
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 96.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1976 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348109
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359537
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359547
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1977 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359548
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379392
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.393835
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1978 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399472
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMMOND, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 CROOKED TREE DRIVE
 City PETOSKEY State MI Zip Code 49770-8545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 746.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419931
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1979 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 DALTON RD
 City LEWISVILLE State NC Zip Code 27023-8108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344383
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

B. HAMMOND, LUTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10400 SE138TH PLACE ROAD
 City SUMMERFIELD State FL Zip Code 34491-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347353
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HAMMOND, LUTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10400 SE138TH PLACE ROAD
 City SUMMERFIELD State FL Zip Code 34491-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405369
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	232.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1980 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMMOND, LUTHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10400 SE138TH PLACE ROAD

City SUMMERFIELD	State FL	Zip Code 34491-
---------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.405371

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HAMPTON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4255 EOLA DR NW

City SALEM	State OR	Zip Code 97304-3345
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HAMPTON AFFILIATES	Occupation (for Individual) FORESTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.367936

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. HAMPTON, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 NESTING WAY

City WARNER ROBINS	State GA	Zip Code 31093-4100
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2016

Transaction ID : SA11A.347458

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1981 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPTON, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 NESTING WAY
 City WARNER ROBINS State GA Zip Code 31093-4100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359295
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAMPTON, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 NESTING WAY
 City WARNER ROBINS State GA Zip Code 31093-4100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366781
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAMPTON, MERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3133ROLAND GARROS LN
 City MODESTO State CA Zip Code 95355-8438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESIGNER URNS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370672
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1982 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPTON, MERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3133ROLAND GARROS LN
 City MODESTO State CA Zip Code 95355-8438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESIGNER URNS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAMPTON, MERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3133ROLAND GARROS LN
 City MODESTO State CA Zip Code 95355-8438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESIGNER URNS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372938
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAMPTON, MERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3133ROLAND GARROS LN
 City MODESTO State CA Zip Code 95355-8438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESIGNER URNS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372940
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1983 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAMPTON, MERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3133ROLAND GARROS LN
City MODESTO State CA Zip Code 95355-8438
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DESIGNER URNS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 18 / 2016**
Transaction ID : SA11A.399932
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HANCE, M, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4181 SHETLAND DR
City ANN ARBOR State MI Zip Code 48105-9536
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ST. JOSEPH MERCY HOSPITAL Occupation (for Individual) PHYSICIAN ASSISTANT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387969
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HANCHEY, LEWIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14 EDMUNDO ROAD
City BELEN State NM Zip Code 87002-8135
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394752
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1984 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCHETT, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19775 TANGLEWOOD

City BIG RAPIDS	State MI	Zip Code 49307-9468
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2016

Transaction ID : SA11A.345200

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HANCHETT, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19775 TANGLEWOOD

City BIG RAPIDS	State MI	Zip Code 49307-9468
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.355833

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. HANCOCK, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WHEARTFIELD CIRCLE
GV132

City BRENTWOOD	State TN	Zip Code 37027-4474
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
427.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.350429

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1985 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCOCK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WHEARTFIELD CIRCLE
 GV132
 City BRENTWOOD State TN Zip Code 37027-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359294
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HANCOCK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WHEARTFIELD CIRCLE
 GV132
 City BRENTWOOD State TN Zip Code 37027-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362429
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HANCOCK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 WHEARTFIELD CIRCLE
 GV132
 City BRENTWOOD State TN Zip Code 37027-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365662
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1986 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCOCK, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WHEARTFIELD CIRCLE
GV132

City BRENTWOOD State TN Zip Code 37027-4474

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
427.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2016

Transaction ID : SA11A.376137

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HANCOCK, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WHEARTFIELD CIRCLE
GV132

City BRENTWOOD State TN Zip Code 37027-4474

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
427.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016

Transaction ID : SA11A.393646

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HANCOCK, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WHEARTFIELD CIRCLE
GV132

City BRENTWOOD State TN Zip Code 37027-4474

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
427.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11A.400875

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1987 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCOCK, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 WHEARTFIELD CIRCLE
GV132

City BRENTWOOD State TN Zip Code 37027-4474

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
427.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2016

Transaction ID : SA11A.408254

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HANCOCK, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 THE CAPE BOULEVARD

City WILMINGTON State NC Zip Code 28412-3325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNCW Occupation (for Individual) PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.378950

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HANCOCK, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 THE CAPE BOULEVARD

City WILMINGTON State NC Zip Code 28412-3325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNCW Occupation (for Individual) PROFESSOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384483

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1988 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANCOCK, ROBERT, , ,

Mailing Address **407 THE CAPE BOULEVARD**

City WILMINGTON	State NC	Zip Code 28412-3325
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNCW	Occupation (for Individual) PROFESSOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
08 / 30 / 2016

Transaction ID : SA11A.384515

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANCOCK, ROBERT, , ,

Mailing Address **407 THE CAPE BOULEVARD**

City WILMINGTON	State NC	Zip Code 28412-3325
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNCW	Occupation (for Individual) PROFESSOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
09 / 08 / 2016

Transaction ID : SA11A.391816

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANCOCK, ROBERT, , ,

Mailing Address **407 THE CAPE BOULEVARD**

City WILMINGTON	State NC	Zip Code 28412-3325
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNCW	Occupation (for Individual) PROFESSOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt
09 / 08 / 2016

Transaction ID : SA11A.391817

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1989 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCOCK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 THE CAPE BOULEVARD
 City WILMINGTON State NC Zip Code 28412-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNCW Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397722
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HANCOCK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 THE CAPE BOULEVARD
 City WILMINGTON State NC Zip Code 28412-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNCW Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397723
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HANCOCK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 THE CAPE BOULEVARD
 City WILMINGTON State NC Zip Code 28412-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNCW Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412314
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1990 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANCOCK, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 THE CAPE BOULEVARD

City WILMINGTON State NC Zip Code 28412-3325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNCW Occupation (for Individual) PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412315

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. HAND, EARL, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8981 GARDEN VALLEY ROAD

City ROSEBURG State OR Zip Code 97471-9655

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.347207

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. HAND, EARL, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8981 GARDEN VALLEY ROAD

City ROSEBURG State OR Zip Code 97471-9655

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373881

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1991 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAND, MARVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 246**

City **CROSS HILL** State **SC** Zip Code **29332-0246**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 28 / 2016**

Transaction ID : SA11A.411856

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

B. HANDAL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **243 STURBRIDGE LANE**

City **SOUTHPORT** State **CT** Zip Code **06890-1050**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **434.00**

Date of Receipt **07 / 01 / 2016**

Transaction ID : SA11A.344332

Amount of Each Receipt this Period **59.00**

Memo Item CONTRIBUTION

C. HANDAL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **243 STURBRIDGE LANE**

City **SOUTHPORT** State **CT** Zip Code **06890-1050**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **434.00**

Date of Receipt **07 / 18 / 2016**

Transaction ID : SA11A.348505

Amount of Each Receipt this Period **75.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **384.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1992 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HANDAL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 STURBRIDGE LANE
 City SOUTHPORT State CT Zip Code 06890-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348508
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HANDAL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 STURBRIDGE LANE
 City SOUTHPORT State CT Zip Code 06890-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366691
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HANDAL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 STURBRIDGE LANE
 City SOUTHPORT State CT Zip Code 06890-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384459
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1993 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANDAL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 STURBRIDGE LANE
 City SOUTHPORT State CT Zip Code 06890-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404659
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HANFORD, DENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 BROADWAY 701
 City TACOMA State WA Zip Code 98402-3997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.363002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HANFORD, DENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 BROADWAY 701
 City TACOMA State WA Zip Code 98402-3997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382163
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1994 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANFORD, DENTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 BROADWAY
701

City TACOMA State WA Zip Code 98402-3997

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.382172

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HANFORD, DENTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 BROADWAY
701

City TACOMA State WA Zip Code 98402-3997

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386321

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HANNAN, KENNETH, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 E END AVENUE
APT 30A

City NEW YORK State NY Zip Code 10028-7946

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLONIAL NAVIGATION CO Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.373499

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1995 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANNERS, MELVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9400 EAST ILIFF AVE. NO. 55

City DENVER	State CO	Zip Code 80231-3484
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PRPERTY RENTALS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418187

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HANSEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 296 BISHOPS FOREST DR.

City WALTHAM	State MA	Zip Code 02452-8808
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEERWALK, INC	Occupation (for Individual) DIRECTOR AND
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358248

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HANSEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 296 BISHOPS FOREST DR.

City WALTHAM	State MA	Zip Code 02452-8808
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEERWALK, INC	Occupation (for Individual) DIRECTOR AND
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390588

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1996 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1619 S ARCH STREET

City JANESVILLE	State WI	Zip Code 53546-5734
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354427

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

B. HANSEN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7648 SOUTH PINE AVENUE

City OAK CREEK	State WI	Zip Code 53154-2343
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358976

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. HANSEN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address RIO MONDAY 185

City ASUNCION	State FL	Zip Code 34202-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359560

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1997 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RIO MONDAY 185
 City ASUNCION State FL Zip Code 34202-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396730
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HANSEN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RIO MONDAY 185
 City ASUNCION State FL Zip Code 34202-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410188
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HANSEN, REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 W. SOUTH LINKS DRIVE
 City WASHINGTON State UT Zip Code 84780-8524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358329
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1998 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 W. SOUTH LINKS DRIVE
 City WASHINGTON State UT Zip Code 84780-8524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374474
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HANSEN, REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 W. SOUTH LINKS DRIVE
 City WASHINGTON State UT Zip Code 84780-8524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382471
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HANSEN, REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 W. SOUTH LINKS DRIVE
 City WASHINGTON State UT Zip Code 84780-8524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399628
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1999 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344489
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344490
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354732
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	89.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2000 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366698
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380600
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HANSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 KELLY AVENUE
 City HALF MOON BAY State CA Zip Code 94019-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380612
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2001 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSEN, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 KELLY AVENUE

City HALF MOON BAY	State CA	Zip Code 94019-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402483

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HANSEN, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 KELLY AVENUE

City HALF MOON BAY	State CA	Zip Code 94019-1635
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416768

Amount of Each Receipt this Period
38.00

Memo Item
CONTRIBUTION

C. HANSON, LEWIS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W51 N602 CEDAR RESERVE CIRCLE

City CEDARBURG	State WI	Zip Code 53012-2134
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385727

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	163.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2002 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSON, LEWIS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **W51 N602 CEDAR RESERVE CIRCLE**

City **CEDARBURG** State **WI** Zip Code **53012-2134**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : SA11A.385731

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

B. HANSON, LEWIS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **W51 N602 CEDAR RESERVE CIRCLE**

City **CEDARBURG** State **WI** Zip Code **53012-2134**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **09 / 30 / 2016**

Transaction ID : SA11A.419344

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

C. HANSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4676 INDIAN CREEK ROAD**

City **LOVELAND** State **CO** Zip Code **80538-9201**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 15 / 2016**

Transaction ID : SA11A.398259

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **450.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2003 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4676 INDIAN CREEK ROAD
 City LOVELAND State CO Zip Code 80538-9201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414881
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HANSON, SONJA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2054 JOHN PAUL JONES LANE
 City BOLINGBROOK State IL Zip Code 60490-2105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406897
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HANSON, STEPHANIE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9295
 City BEAVER CREEK State CO Zip Code 81620-9203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.345793
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2004 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANTHORN, LARRY, , ,

Mailing Address 1317 E 6TH

City PELLA State IA Zip Code 50219-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICROSOFT Occupation (for Individual) PROGRAM EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374568

Amount of Each Receipt this Period
 250.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANTHORN, LARRY, , ,

Mailing Address 1317 E 6TH

City PELLA State IA Zip Code 50219-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICROSOFT Occupation (for Individual) PROGRAM EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380369

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANTHORN, LARRY, , ,

Mailing Address 1317 E 6TH

City PELLA State IA Zip Code 50219-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MICROSOFT Occupation (for Individual) PROGRAM EXECUTIVE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383920

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2005 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANTHORN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 E 6TH
 City PELLA State IA Zip Code 50219-1352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICROSOFT Occupation (for Individual) PROGRAM EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399687
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HANTHORN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 E 6TH
 City PELLA State IA Zip Code 50219-1352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICROSOFT Occupation (for Individual) PROGRAM EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAQUE, PROMOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13780 SARATOGA AVENUE
 City SARATOGA State CA Zip Code 95070-5432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORWEST VENTURE PARTNERING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387649
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2006 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HARBAUGH, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3508
 City ASHLAND State OR Zip Code 97520-0317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359098
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HARBAUGH, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3508
 City ASHLAND State OR Zip Code 97520-0317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388137
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HARBAUGH, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3508
 City ASHLAND State OR Zip Code 97520-0317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411408
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2007 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARBAUGH, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 3508**

City **ASHLAND** State **OR** Zip Code **97520-0317**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **09 / 30 / 2016**

Transaction ID : SA11A.422585

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

B. HARD, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **10 SEVEN SPRINGS DR.**

City **READING** State **PA** Zip Code **19607-9766**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **PENSKE TRUCK LEASING** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **07 / 12 / 2016**

Transaction ID : SA11A.346978

Amount of Each Receipt this Period **10000.00**

Memo Item CONTRIBUTION

C. HARDEN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1560 MISTY OAKS DRIVE**

City **SANDY SPRINGS** State **GA** Zip Code **30350-3500**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2016**

Transaction ID : SA11A.416289

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **10350.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2008 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDEN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1560 MISTY OAKS DRIVE
 City SANDY SPRINGS State GA Zip Code 30350-3500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416290
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HARDEN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6434 MIMOSA LANE
 City DALLAS State TX Zip Code 75230-5137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349897
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HARDEN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6434 MIMOSA LANE
 City DALLAS State TX Zip Code 75230-5137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382082
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2009 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDEN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6434 MIMOSA LANE
 City DALLAS State TX Zip Code 75230-5137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382084
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HARDEN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6434 MIMOSA LANE
 City DALLAS State TX Zip Code 75230-5137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 06 / 2016
Transaction ID : SA11A.390307
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HARDEN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6434 MIMOSA LANE
 City DALLAS State TX Zip Code 75230-5137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405090
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2010 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDIN, IRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 SHALEM CONOLY TRAIL
 City LAS CRUCES State NM Zip Code 88007-4900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378511
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HARDING, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1213 GLYNN ARCHER JR DR OFFICE
 City KEY WEST State FL Zip Code 33040-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 331.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353728
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARDING, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1213 GLYNN ARCHER JR DR OFFICE
 City KEY WEST State FL Zip Code 33040-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 331.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391868
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2011 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDWICKE, LAWRENCE, G., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1625 WESTWOOD DR

City ABILENE	State TX	Zip Code 79603-4253
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354955

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HARDWICKE, LAWRENCE, G., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1625 WESTWOOD DR

City ABILENE	State TX	Zip Code 79603-4253
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365365

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. HARDWICKE, LAWRENCE, G., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1625 WESTWOOD DR

City ABILENE	State TX	Zip Code 79603-4253
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397284

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2012 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDWICKE, LAWRENCE, G., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 WESTWOOD DR

City ABILENE	State TX	Zip Code 79603-4253
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417283

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HARDY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 EAST RIDGE ROAD

City WACCABUC	State NY	Zip Code 10597-1203
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OSLER, HOSKIN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353632

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HARDY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 EAST RIDGE ROAD

City WACCABUC	State NY	Zip Code 10597-1203
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OSLER, HOSKIN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357571

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2013 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARDY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 EAST RIDGE ROAD

City WACCABUC	State NY	Zip Code 10597-1203
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OSLER, HOSKIN	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382726

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HARDY, JOSEPH, A., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1019 ROUTE 519

City EIGHTY FOUR	State PA	Zip Code 15330-2813
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) 84 LUMBER	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.347213

Amount of Each Receipt this Period
30000.00

Memo Item
CONTRIBUTION

C. HARLAN, MARIE, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27140 E EL MACERO DR.

City EL MACERO	State CA	Zip Code 95618-1007
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.367122

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	31100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2014 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARLFINGER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7830 MANASOTA KEY ROAD
 City ENGLEWOOD State FL Zip Code 34223-9359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FBM Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407775
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HARLFINGER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7830 MANASOTA KEY ROAD
 City ENGLEWOOD State FL Zip Code 34223-9359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FBM Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410824
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HARLFINGER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7830 MANASOTA KEY ROAD
 City ENGLEWOOD State FL Zip Code 34223-9359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FBM Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418907
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2015 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARLOW, BRYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1812 SOLITAIRE LANE

City MC LEAN	State VA	Zip Code 22101-4200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TIMMONS & CO., INC.	Occupation (for Individual) PRESIDENT AND MANAGING PARTN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.353020

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

B. HARMAN, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 609 E 9TH ST

City HOUSTON	State TX	Zip Code 77007-1721
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DELOITTE CONSULTING	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407924

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HARMON, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 WILLOWDALE BLVD.

City LULING	State LA	Zip Code 70070-3132
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CIVIL CONSTRUCTION CONTRACTORS, LLC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.366570

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2016 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARMON, PETE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 WILLOWDALE BLVD.
 City LULING State LA Zip Code 70070-3132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CIVIL CONSTRUCTION CONTRACTORS, LLC PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399262
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HARNER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 LOUELLA LN
 City NOKOMIS State FL Zip Code 34275-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CROWS NEST OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402292
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HARPER, MARILYN, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 VIA LA SELVA
 City PALOS VERDES ESTAT State CA Zip Code 90274-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392497
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2017 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARPER, MARILYN, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 VIA LA SELVA
 City PALOS VERDES ESTAT State CA Zip Code 90274-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.396148
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HARRELL, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2921 CASON STREET
 City HOUSTON State TX Zip Code 77005-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389519
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HARRIS, BOBBYE, F., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 WINDSOR DRIVE
 City CALHOUN State GA Zip Code 30701-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361289
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2018 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRIS, BOBBYE, F., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 WINDSOR DRIVE
 City CALHOUN State GA Zip Code 30701-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389515
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. HARRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23164 LANDRUM VILLAGE DRIVE
 City MONTGOMERY State TX Zip Code 77316-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373173
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. HARRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23164 LANDRUM VILLAGE DRIVE
 City MONTGOMERY State TX Zip Code 77316-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373177
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1045.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2019 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23164 LANDRUM VILLAGE DRIVE
 City MONTGOMERY State TX Zip Code 77316-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373178
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HARRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23164 LANDRUM VILLAGE DRIVE
 City MONTGOMERY State TX Zip Code 77316-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.379091
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HARRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23164 LANDRUM VILLAGE DRIVE
 City MONTGOMERY State TX Zip Code 77316-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.379092
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2020 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRISON, HOLT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 232 B LITTLE JOHN DRIVE

City BATON ROUGE	State LA	Zip Code 70815-6124
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389606

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. HARRIGAN, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4118 LARK STREET

City SAN DIEGO	State CA	Zip Code 92103-1302
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.395838

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HARRISON, JOSHUA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 LEE AVENUE

City COLLEGE STATION	State TX	Zip Code 77840-3178
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.370904

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2021 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRINGTON, KEVIN, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 DEDHAM STREET

City CANTON	State MA	Zip Code 02021-1418
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PLANNED STRATEGIES	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400807

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. HARRIS, MABEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5042 SW HILLTOP LANE

City PORTLAND	State OR	Zip Code 97221-2304
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408304

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. HARRIMAN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 REDWOOD DR.
P.O. BOX 549

City WOODACRE	State CA	Zip Code 94973-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.404447

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2022 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRIMAN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 REDWOOD DR.
 P.O. BOX 549
 City WOODACRE State CA Zip Code 94973-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420197
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARRIS, R. JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18235 W BURLEIGH RD
 City BROOKFIELD State WI Zip Code 53045-2524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385218
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. HARRIAGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3263 BRIDGEFIELD DRIVE
 City LAKELAND State FL Zip Code 33803-7903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIAGNOSTIC RADIOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370917
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2023 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRIAGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3263 BRIDGEFIELD DRIVE
 City LAKELAND State FL Zip Code 33803-7903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIAGNOSTIC RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392526
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HARRIS, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1924 VERANDA CT
 City MODESTO State CA Zip Code 95357-0846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350313
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HARRIS, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1924 VERANDA CT
 City MODESTO State CA Zip Code 95357-0846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361962
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2024 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRIS, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1924 VERANDA CT
 City: MODESTO State: CA Zip Code: 95357-0846
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): NONE Occupation (for Individual): RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt: 08 / 11 / 2016
 Transaction ID : SA11A.364792
 Amount of Each Receipt this Period: 25.00
 Memo Item CONTRIBUTION

B. HARRIS, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1924 VERANDA CT
 City: MODESTO State: CA Zip Code: 95357-0846
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): NONE Occupation (for Individual): RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt: 08 / 18 / 2016
 Transaction ID : SA11A.372543
 Amount of Each Receipt this Period: 50.00
 Memo Item CONTRIBUTION

C. HARRIS, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2851 SEMINOLE STREET
 City: MIAMI State: FL Zip Code: 33133-3234
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): SELF EMPLOYED Occupation (for Individual): PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 29 / 2016
 Transaction ID : SA11A.414416
 Amount of Each Receipt this Period: 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2025 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRISON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 SUGARBERRY CIRCLE
 City HOUSTON State TX Zip Code 77024-7212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392447
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. HARRISON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 WESTPARK DR. STE 9
 City LITTLE ROCK State AR Zip Code 72204-2457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRISON ENERGY PARTNERS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372206
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HARRISON, WILIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 N LODGE DRIVE
 City SARASOTA State FL Zip Code 34239-5007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396963
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2026 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARROLD, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 DEMARINI DR.

City WALLA WALLA	State WA	Zip Code 99362-5032
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350580

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HARROLD, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 DEMARINI DR.

City WALLA WALLA	State WA	Zip Code 99362-5032
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.360240

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HARROLD, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 DEMARINI DR.

City WALLA WALLA	State WA	Zip Code 99362-5032
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362440

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2027 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARROLD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 DEMARINI DR.
 City WALLA WALLA State WA Zip Code 99362-5032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365033
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HARROLD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 DEMARINI DR.
 City WALLA WALLA State WA Zip Code 99362-5032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370744
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HARROLD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 DEMARINI DR.
 City WALLA WALLA State WA Zip Code 99362-5032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391286
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2028 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARROLD, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 DEMARINI DR.

City WALLA WALLA	State WA	Zip Code 99362-5032
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394441

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HARROLD, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 DEMARINI DR.

City WALLA WALLA	State WA	Zip Code 99362-5032
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402579

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HARROLD, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 DEMARINI DR.

City WALLA WALLA	State WA	Zip Code 99362-5032
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415813

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2029 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARSHAW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 PARK ROAD
 City PORTSMOUTH State VA Zip Code 23707-1213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.349739
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HARSHAW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 PARK ROAD
 City PORTSMOUTH State VA Zip Code 23707-1213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368396
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HARSHAW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 PARK ROAD
 City PORTSMOUTH State VA Zip Code 23707-1213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383917
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2030 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARSHAW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 PARK ROAD
 City PORTSMOUTH State VA Zip Code 23707-1213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418090
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HARSHAW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 PARK ROAD
 City PORTSMOUTH State VA Zip Code 23707-1213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418111
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HART, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1346 W. 16TH PLACE
 City YUMA State AZ Zip Code 85364-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379902
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2031 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HART, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1346 W. 16TH PLACE
City YUMA State AZ Zip Code 85364-5310
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016
Transaction ID : SA11A.380524
Amount of Each Receipt this Period
250.00
 Memo Item
CONTRIBUTION

B. HART, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7615 SIERRA DRIVE
City GRANITE BAY State CA Zip Code 95746-6961
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NEUROVISION IMAGING Occupation (for Individual) PRODUCT MANAGER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016
Transaction ID : SA11A.382267
Amount of Each Receipt this Period
250.00
 Memo Item
CONTRIBUTION

C. HART, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 BUBIERR ROAD
City MARBLEHEAD State MA Zip Code 01945-3620
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016
Transaction ID : SA11A.381389
Amount of Each Receipt this Period
250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2032 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HART, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 BUBIERR ROAD
 City MARBLEHEAD State MA Zip Code 01945-3620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404410
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HART, RAYMOND, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 GROGANS LAKE DR
 City SANDY SPRINGS State GA Zip Code 30350-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349156
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HART, RAYMOND, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 GROGANS LAKE DR
 City SANDY SPRINGS State GA Zip Code 30350-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.354028
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2033 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HART, RAYMOND, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 GROGANS LAKE DR
 City SANDY SPRINGS State GA Zip Code 30350-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374776
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HART, RAYMOND, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 GROGANS LAKE DR
 City SANDY SPRINGS State GA Zip Code 30350-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399741
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HART, ROSWELL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5650 W QUINCY AVENUE UNIT 22
 UNIT 22
 City DENVER State CO Zip Code 80235-3065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381216
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2034 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HART, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 COUNTRY CLUB ROAD
 City LAGRANGE State GA Zip Code 30240-1007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410998
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HART, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 COUNTRY CLUB ROAD
 City LAGRANGE State GA Zip Code 30240-1007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.416055
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HART, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 COUNTRY CLUB ROAD
 City LAGRANGE State GA Zip Code 30240-1007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.416062
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2035 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTMAN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 643 BARON ROAD
 City WAXHAW State NC Zip Code 28173-9382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIMENSION DATA Occupation (for Individual) PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384592
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HARTMAN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 643 BARON ROAD
 City WAXHAW State NC Zip Code 28173-9382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIMENSION DATA Occupation (for Individual) PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406715
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. HARTMAN, LYND A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2387 MOUNT OLYMPUS DRIVE
 City LOS ANGELES State CA Zip Code 90046-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MRS.LYND A J. HARTMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362269
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2036 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTMAN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2387 MOUNT OLYMPUS DRIVE

City LOS ANGELES	State CA	Zip Code 90046-1660
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MRS.LYNDA J. HARTMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.396751

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HARTMAN, LYNDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2387 MOUNT OLYMPUS DRIVE

City LOS ANGELES	State CA	Zip Code 90046-1660
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MRS.LYNDA J. HARTMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.396752

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HARTMAN, MARCIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 771 HAYES ST

City MARNE	State MI	Zip Code 49435-9601
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) H&H METAL SOURCE	Occupation (for Individual) CFO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359920

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2037 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTMAN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 771 HAYES ST
 City MARNE State MI Zip Code 49435-9601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H&H METAL SOURCE Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384811
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARTMAN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 771 HAYES ST
 City MARNE State MI Zip Code 49435-9601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H&H METAL SOURCE Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419563
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARTMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2858 E WATFORD COURT
 City QUEEN CREEK State AZ Zip Code 85142-8422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384202
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2038 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTMAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2858 E WATFORD COURT
 City QUEEN CREEK State AZ Zip Code 85142-8422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384208
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARTUNG, DANIEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 HEARTLAND TRAIL SUITE 2000
 City MADISON State WI Zip Code 53717-2172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARTUNG BROTHERS INC Occupation (for Individual) HARTUNG BROTHERS INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368179
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HARTUNG, DANIEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 HEARTLAND TRAIL SUITE 2000
 City MADISON State WI Zip Code 53717-2172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARTUNG BROTHERS INC Occupation (for Individual) HARTUNG BROTHERS INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386556
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2039 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTUNG, DANIEL, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 708 HEARTLAND TRAIL
SUITE 2000

City MADISON State WI Zip Code 53717-2172

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HARTUNG BROTHERS INC Occupation (for Individual) HARTUNG BROTHERS INC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419722

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. HARTZLER, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 839 SIMMONS CT.

City SOUTHLAKE State TX Zip Code 76092-5556

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352785

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. HARTZLER, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 839 SIMMONS CT.

City SOUTHLAKE State TX Zip Code 76092-5556

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352786

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2040 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARTZLER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 SIMMONS CT.
 City SOUTHLAKE State TX Zip Code 76092-5556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376151
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HARTZLER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 SIMMONS CT.
 City SOUTHLAKE State TX Zip Code 76092-5556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408329
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. HARTZLER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 SIMMONS CT.
 City SOUTHLAKE State TX Zip Code 76092-5556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408330
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2041 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARVEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 891 N KENTUCKY STREET
 City ARLINGTON State VA Zip Code 22205-1316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) MILITARY PRO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380945
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HARWOOD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 RAINTREE CIRCLE
 City CULVER CITY State CA Zip Code 90230-4433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357519
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HARWOOD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 RAINTREE CIRCLE
 City CULVER CITY State CA Zip Code 90230-4433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382776
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2042 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARWOOD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 RAINTREE CIRCLE
 City CULVER CITY State CA Zip Code 90230-4433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394072
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARWOOD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 RAINTREE CIRCLE
 City CULVER CITY State CA Zip Code 90230-4433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413018
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HASEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 ROYAL PALM WAYY
 City BOCA RATON State FL Zip Code 33432-7446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLOOMFIELD CONSTRUCTION INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402876
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2043 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HASEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 ROYAL PALM WAYY
 City BOCA RATON State FL Zip Code 33432-7446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLOOMFIELD CONSTRUCTION INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402901
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HASEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 ROYAL PALM WAYY
 City BOCA RATON State FL Zip Code 33432-7446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLOOMFIELD CONSTRUCTION INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402902
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HASEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 ROYAL PALM WAYY
 City BOCA RATON State FL Zip Code 33432-7446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLOOMFIELD CONSTRUCTION INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402916
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2044 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HATCH, CLARK, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3859 POKAPAHU PLACE

City HONOLULU	State HI	Zip Code 96816-4410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.406644

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HATCHER, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 332 GRACE STREET

City MOUNT AIRY	State NC	Zip Code 27030-2910
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387677

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

C. HATCH, ROBERT, W., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 W 55TH STREET

City KANSAS CITY	State MO	Zip Code 64113-1101
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CEREAL INGREDIENTS INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369523

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2045 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HATHORN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9110 WEYMOUTH DR.
 City HOUSTON State TX Zip Code 77031-3034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386569
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HAUBRICH, CHARLES, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33343 ACADEMY RD
 City BURLINGTON State WI Zip Code 53105-9614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAUTALA, DONALD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 S 227TH STREET APT 301N
 City DES MOINES State WA Zip Code 98198-6895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347817
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2046 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAUTALA, DONALD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 S 227TH STREET
APT 301N

City DES MOINES State WA Zip Code 98198-6895

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.417077

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HAVENS, KATHLEEN, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP State NJ Zip Code 07928-1307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2016

Transaction ID : SA11A.345933

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

C. HAVENS, KATHLEEN, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP State NJ Zip Code 07928-1307

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.349183

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2047 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVENS, KATHLEEN, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP	State NJ	Zip Code 07928-1307
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368723

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HAVENS, KATHLEEN, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP	State NJ	Zip Code 07928-1307
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382843

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HAVENS, KATHLEEN, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP	State NJ	Zip Code 07928-1307
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386135

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2048 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVENS, KATHLEEN, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP	State NJ	Zip Code 07928-1307
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386137

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HAVENS, KATHLEEN, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP	State NJ	Zip Code 07928-1307
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391236

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HAVENS, KATHLEEN, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 , GLENMERE DR.

City CHATHAM TWP	State NJ	Zip Code 07928-1307
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ARTIST
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.396916

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2049 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVENS, KATHLEEN, G., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 127 , GLENMERE DR.
City CHATHAM TWP State NJ Zip Code 07928-1307
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 345.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419965
Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. HAVEN, LAVONNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9060 ASHVILLE DR.
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346870
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAVEN, LAVONNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9060 ASHVILLE DR.
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CAMP FIRE GULF WIND, INC. Occupation (for Individual) YOUTH DEVELOPMENT
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348232
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 95.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2050 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349370
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357288
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368692
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2051 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.370112
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374506
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374508
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2052 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.374671
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 16 / 2016
Transaction ID : SA11A.398740
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399327
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2053 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVEN, LAVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399328
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAVEN, MARIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9060 ASHVILLE DR.
 City PENSACOLA State FL Zip Code 32514-5691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CAMP FIRE GULF WIND, INC. YOUTH DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344427
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HAVER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 WOODBINE STREET
 City BERGENFIELD State NJ Zip Code 07621-3520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 339.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360221
 Amount of Each Receipt this Period
 89.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	139.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2054 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAVER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 WOODBINE STREET
 City BERGENFIELD State NJ Zip Code 07621-3520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 339.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368331
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAVER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 WOODBINE STREET
 City BERGENFIELD State NJ Zip Code 07621-3520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 339.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384053
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAWK, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1257 N PINE GROVE
 City WICHITA State KS Zip Code 67212-5674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368438
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2055 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWK, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1257 N PINE GROVE
 City WICHITA State KS Zip Code 67212-5674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368442
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAWK, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1257 N PINE GROVE
 City WICHITA State KS Zip Code 67212-5674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405547
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAWKINS, EDITH, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 W SHADY LANE
 City HOUSTON State TX Zip Code 77063-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361368
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2056 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWKINS, JEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 323 RUMSTICK ROAD

City BARRINGTON	State RI	Zip Code 02806-4920
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016

Transaction ID : SA11A.366157

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. HAWKINS, ORVAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 CEDAR TREE LANE

City PARKERSBURG	State WV	Zip Code 26104-7256
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
314.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : SA11A.344387

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

C. HAWKINS, ORVAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 CEDAR TREE LANE

City PARKERSBURG	State WV	Zip Code 26104-7256
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
314.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : SA11A.344388

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	564.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2057 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349882
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365889
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386529
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2058 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402286
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HAWKINS, ORVAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CEDAR TREE LANE
 City PARKERSBURG State WV Zip Code 26104-7256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413915
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HAWKINS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3435 OCEAN PARK BLD SUITE 107
 City SANTA MONICA State CA Zip Code 90405-3320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390867
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2059 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWKINS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2882 BRIDLE PATH
City FRIENDSWOOD State TX Zip Code 77546-3043
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) COLT INTERNATIONAL Occupation (for Individual) EXEC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409416
Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. HAWLEY, KIMRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10163 MIGUELITA ROAD
City SAN JOSE State CA Zip Code 95127-2713
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395976
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. HAWS, FRANK, P., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 421 MCCLUNG AVENUE SE
City HUNTSVILLE State AL Zip Code 35801-3111
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354906
Amount of Each Receipt this Period 200.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3700.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2060 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAWS, FRANK, P., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 MCCLUNG AVENUE SE
 City HUNTSVILLE State AL Zip Code 35801-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364458
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAWTHORNE, DIANA, BAKER, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 GLENBROOK COURT
 City COLUMBIA State MO Zip Code 65203-5345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398005
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAWXHURST, EDWIN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 109TH AVNEUE NE APT 1204
 City BELLEVUE State WA Zip Code 98004-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381085
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2061 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HAY, JAMES, , ,		Date of Receipt MM / DD / YYYY 07 / 03 / 2016 Transaction ID : SA11A.344218
Mailing Address 1245 E. BRAEMERE RD.		Amount of Each Receipt this Period 100.00
City BOISE	State ID ID	<input type="checkbox"/> Memo Item CONTRIBUTION
Zip Code 83702-1853	FEC ID number of contributing federal political committee. C	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HAY, JAMES, , ,		Date of Receipt MM / DD / YYYY 08 / 12 / 2016 Transaction ID : SA11A.366970
Mailing Address 1245 E. BRAEMERE RD.		Amount of Each Receipt this Period 100.00
City BOISE	State ID ID	<input type="checkbox"/> Memo Item CONTRIBUTION
Zip Code 83702-1853	FEC ID number of contributing federal political committee. C	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HAY, JAMES, , ,		Date of Receipt MM / DD / YYYY 09 / 13 / 2016 Transaction ID : SA11A.394258
Mailing Address 1245 E. BRAEMERE RD.		Amount of Each Receipt this Period 100.00
City BOISE	State ID ID	<input type="checkbox"/> Memo Item CONTRIBUTION
Zip Code 83702-1853	FEC ID number of contributing federal political committee. C	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2062 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYCOCK, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7657 SPANISH LAKE DRIVE
 City LAS VEGAS State NV Zip Code 89113-1357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **08 / 02 / 2016**
Transaction ID : SA11A.358902
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HAYCOCK, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7657 SPANISH LAKE DRIVE
 City LAS VEGAS State NV Zip Code 89113-1357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.411785
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HAYDEN, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 SANDY WAY
 City BENICIA State CA Zip Code 94510-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.348293
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2063 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYDEN, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348819

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HAYDEN, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2016

Transaction ID : SA11A.363354

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HAYDEN, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365694

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2064 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYDEN, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372733

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HAYDEN, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399934

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HAYDEN, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.404347

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2065 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYDEN, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 SANDY WAY
 City BENICIA State CA Zip Code 94510-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405382
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HAYDEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2711 KENNEDY DRIVE
 City MELISSA State TX Zip Code 75454-2499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.348009
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HAYDEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2711 KENNEDY DRIVE
 City MELISSA State TX Zip Code 75454-2499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364452
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2066 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11A.348736

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2016

Transaction ID : SA11A.365031

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
495.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2016

Transaction ID : SA11A.372735

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2067 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394534

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HAYES, FORREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WEXFORD ON THE GREEN

City HILTON HEAD	State SC	Zip Code 29928-6125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399944

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HAYES, ROBERT, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 252 SMYTHE DR

City WILLIAMS BAY	State WI	Zip Code 53191-9506
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2016

Transaction ID : SA11A.347012

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2068 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, ROBERT, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 252 SMYTHE DR

City WILLIAMS BAY	State WI	Zip Code 53191-9506
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353188

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HAYES, ROBERT, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 252 SMYTHE DR

City WILLIAMS BAY	State WI	Zip Code 53191-9506
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2016

Transaction ID : SA11A.366937

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HAYES, ROBERT, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 252 SMYTHE DR

City WILLIAMS BAY	State WI	Zip Code 53191-9506
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391201

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2069 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, ROBERT, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 SMYTHE DR
 City WILLIAMS BAY State WI Zip Code 53191-9506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391203
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAYES, ROBERT, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 SMYTHE DR
 City WILLIAMS BAY State WI Zip Code 53191-9506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391204
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HAYES, ROBERT, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 SMYTHE DR
 City WILLIAMS BAY State WI Zip Code 53191-9506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394553
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2070 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYES, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 19TH AVENUE
 City SAN FRANCISCO State CA Zip Code 94116-1804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366323
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAYHOE, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1851 PARK SKYLINE ROAD
 City SANTA ANA State CA Zip Code 92705-3185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352459
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HAYHOE, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1851 PARK SKYLINE ROAD
 City SANTA ANA State CA Zip Code 92705-3185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375959
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2071 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYHOE, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1851 PARK SKYLINE ROAD
 City SANTA ANA State CA Zip Code 92705-3185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404691
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAYHOE, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1851 PARK SKYLINE ROAD
 City SANTA ANA State CA Zip Code 92705-3185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAYNES, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11015 MAIN ST
 City ROSCOE State IL Zip Code 61073-8857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353452
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2072 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYNES, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11015 MAIN ST
 City ROSCOE State IL Zip Code 61073-8857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404379
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HAYNES, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 ALGONQUIAN DRIVE
 City NATICK State MA Zip Code 01760-6095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378603
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HAYNIE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2781 CREEK SIDE DRIVE
 City SUMTER State SC Zip Code 29150-2203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373630
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2073 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYS, THOMAS, D., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 WYNMERE ROAD

City WYNNEWOOD	State PA	Zip Code 19096-1308
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NHS ADVISORS INC.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415456

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. HAYS, THOMAS, D., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 WYNMERE ROAD

City WYNNEWOOD	State PA	Zip Code 19096-1308
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NHS ADVISORS INC.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418762

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HAYWARD, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 W COUNTY LINE ROAD

City BARRINGTON	State IL	Zip Code 60010-2613
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369477

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2074 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYWARD, THOMAS, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 UNIVERSITY ST.
 APT 4-E
 City SEATTLE State WA Zip Code 98101-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369930
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HAYWARD, THOMAS, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 UNIVERSITY ST.
 APT 4-E
 City SEATTLE State WA Zip Code 98101-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403170
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HAZELL, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 548 N MISSION DRIVE
 City SAN GABRIEL State CA Zip Code 91775-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381014
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2075 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAZELTON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20756 CIRCULO DURANGO
 City YORBA LINDA State CA Zip Code 92887-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DARE-AMERICA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412591
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HAZELTON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20756 CIRCULO DURANGO
 City YORBA LINDA State CA Zip Code 92887-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DARE-AMERICA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412726
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAZELTON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20756 CIRCULO DURANGO
 City YORBA LINDA State CA Zip Code 92887-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DARE-AMERICA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412727
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2076 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAZLETT, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 OLD SAYBROOK DR.
 City GREENSBORO State NC Zip Code 27455-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348573
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HAZLETT, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 OLD SAYBROOK DR.
 City GREENSBORO State NC Zip Code 27455-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368936
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HAZLETT, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 OLD SAYBROOK DR.
 City GREENSBORO State NC Zip Code 27455-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391044
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2077 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAZLETT, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 OLD SAYBROOK DR.
 City GREENSBORO State NC Zip Code 27455-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.411713
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. HEADDEN, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 VICTORY AVE
 1502
 City DALLAS State TX Zip Code 75219-7675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2016
Transaction ID : SA11A.363326
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

C. HEADRICK, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 585 LOCUST HILLS DRIVE
 City WAYZATA State MN Zip Code 55391-1966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412696
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2078 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEAFNER, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24895 BAXTER RANCH RD
 City LAKE ELSINORE State CA Zip Code 92532-7314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345885
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEAFNER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6009 S. REGAL LANE
 City CHARLOTTE State NC Zip Code 28210-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420246
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HEALY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 PROVIDENCE BRANCH LANE
 City CHARLOTTE State NC Zip Code 28270-8560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS FARGO Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364265
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2079 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HEALY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 PROVIDENCE BRANCH LANE
 City CHARLOTTE State NC Zip Code 28270-8560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WELLS FARGO BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 02 / 2016
Transaction ID : SA11A.389075
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. HEARN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 GREEN HILL MANOR DR.
 City FRANKLIN PARK State NJ Zip Code 08823-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 I C SOLUTIONS SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368482
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HEARN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 GREEN HILL MANOR DR.
 City FRANKLIN PARK State NJ Zip Code 08823-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 I C SOLUTIONS SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368483
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2080 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEATH, GERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 282 SCARLETT DRIVE

City BEAVERCREEK	State OH	Zip Code 45434-6241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.356604

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. HEATH, GERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 282 SCARLETT DRIVE

City BEAVERCREEK	State OH	Zip Code 45434-6241
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363545

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HEATH, MARGARET, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5015 GREYHAWK PLACE

City APEX	State NC	Zip Code 27539-9323
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PROPERTY MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.396237

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2081 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEATWOLE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5651 WEST CAMINO CIELO
 City SANTA BARBARA State CA Zip Code 93105-9706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412164
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. HECK, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 MT ROYAL BLVD
 City GLENSHAW State PA Zip Code 15116-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARY ANNE HECK Occupation (for Individual) MISS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344301
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. HECK, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 MT ROYAL BLVD
 City GLENSHAW State PA Zip Code 15116-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARY ANNE HECK Occupation (for Individual) MISS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419773
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	656.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2082 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HECK, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 MT ROYAL BLVD
 City GLENSHAW State PA Zip Code 15116-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARY ANNE HECK Occupation (for Individual) MISS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419774
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HECKERT, JAKOB, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 PINE BRAE DR.
 City ANN ARBOR State MI Zip Code 48105-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357643
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HECKERT, JAKOB, K., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 PINE BRAE DR.
 City ANN ARBOR State MI Zip Code 48105-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382751
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2083 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HECKERT, JAKOB, K., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 419 PINE BRAE DR.
City ANN ARBOR State MI Zip Code 48105-2743
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392093
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HECKERT, JAKOB, K., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 419 PINE BRAE DR.
City ANN ARBOR State MI Zip Code 48105-2743
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413009
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HEERIN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 765 LULLWATER ROAD NE
City ATLANTA State GA Zip Code 30307-1288
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362788
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 555.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2084 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEETER, CHARLES, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 OAKVIEW DRIVE
 City MCLEAN State VA Zip Code 22101-4140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364363
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HEFTER, DAVID, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 192 LANDIS WAY N
 City WILMINGTON State DE Zip Code 19803-6405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358608
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HEFTER, DAVID, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 192 LANDIS WAY N
 City WILMINGTON State DE Zip Code 19803-6405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381022
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2085 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEGER, MARLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 ROAD. 21
 City HUGOTON State KS Zip Code 67951-5303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413590
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HEGER, MARLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 ROAD. 21
 City HUGOTON State KS Zip Code 67951-5303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413591
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HEGER, MARLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 ROAD. 21
 City HUGOTON State KS Zip Code 67951-5303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413592
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2086 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEGGE, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22720 CAVALIER STREET

City WOODLAND HILLS	State CA	Zip Code 91364-3909
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355775

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HEGGE, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22720 CAVALIER STREET

City WOODLAND HILLS	State CA	Zip Code 91364-3909
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380721

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HEGGE, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22720 CAVALIER STREET

City WOODLAND HILLS	State CA	Zip Code 91364-3909
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407957

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2087 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEIDE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5825 6TH PLACE
 City KENOSHA State WI Zip Code 53144-7216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385217
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. HEIECK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 E SANTA AURELIA
 City TUCSON State AZ Zip Code 85715-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355638
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HEIECK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 E SANTA AURELIA
 City TUCSON State AZ Zip Code 85715-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386265
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2088 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEIECK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 E SANTA AURELIA
 City TUCSON State AZ Zip Code 85715-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392001
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HEIN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7087 PARFET STREET
 City ARVADA State CO Zip Code 80004-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355334
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HEIN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7087 PARFET STREET
 City ARVADA State CO Zip Code 80004-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355342
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2089 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEINDEL, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 339 WINNERS CIRCLE

City RED LION	State PA	Zip Code 17356-8796
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11A.388899

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HEINER, CLYDE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 388 QUAIL RUN ROAD

City FARMINGTON	State UT	Zip Code 84025-3819
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359269

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HEINER, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 850 GROVE DRIVE

City ALPINE	State UT	Zip Code 84004-1106
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.360952

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2090 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEINEL, ELMER, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 PROSPECT HILL AVE
 City SUMMIT State NJ Zip Code 07901-3705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346081
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. HEINRICH, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 VIA MARIE CELESTE
 City RANCHO PALOS VERDE State CA Zip Code 90275-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353868
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HEINRICH, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 VIA MARIE CELESTE
 City RANCHO PALOS VERDE State CA Zip Code 90275-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389339
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2850.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2091 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEINRICH, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 VIA MARIE CELESTE
 City RANCHO PALOS VERDE State CA Zip Code 90275-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HEINZ, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 W. CENTURY BLVD. #20
 City LODI State CA Zip Code 95240-6611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.354011
 Amount of Each Receipt this Period 510.00
 Memo Item CONTRIBUTION

C. HEISTAND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3697 LANDSTOWN RD
 City VIRGINIA BEACH State VA Zip Code 23456-1282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354486
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	660.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2092 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HEITKOETTER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 HILLCREST DR.
 NONE
 City UNION State MO Zip Code 63084-2855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350412
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HEITKOETTER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 HILLCREST DR.
 NONE
 City UNION State MO Zip Code 63084-2855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357455
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HEITKOETTER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 HILLCREST DR.
 NONE
 City UNION State MO Zip Code 63084-2855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366922
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2093 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HEITKOETTER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 HILLCREST DR.
 NONE
 City UNION State MO Zip Code 63084-2855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : SA11A.382704
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HEITKOETTER, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 HILLCREST DR.
 NONE
 City UNION State MO Zip Code 63084-2855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.413066
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 07 / 14 / 2016
Transaction ID : SA11A.347347
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2094 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380663
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.384981
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.389353
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2095 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.389354
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406010
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HELFEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5437 HARGROVE BLVD
 City VIRGINIA BEACH State VA Zip Code 23464-2333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408959
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2096 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELFRICH, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 SW 3RD AVE
 City ONTARIO State OR Zip Code 97914-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YTURRI ROSE LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016
Transaction ID : SA11A.390728
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. HELFRICH, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 SW 3RD AVE
 City ONTARIO State OR Zip Code 97914-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YTURRI ROSE LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016
Transaction ID : SA11A.390729
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HELFRICH, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 SW 3RD AVE
 City ONTARIO State OR Zip Code 97914-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YTURRI ROSE LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016
Transaction ID : SA11A.390730
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	220.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2097 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELFRICH, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 SW 3RD AVE
 City ONTARIO State OR Zip Code 97914-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YTURRI ROSE LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411925
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. HELGESON, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 QUAIL ST
 City MAHTOMEDI State MN Zip Code 55115-1938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420175
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HELLMAN, RALPH, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 OLD DOMINION BLVD
 City ALEXANDRIA State VA Zip Code 22305-1318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUGAR HELLMAN GROUP Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.387688
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2098 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HELMKAMP, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 MANITOU TRAIL
 City GODFREY State IL Zip Code 62035-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365426
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HELWIG, ARTHUR, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8911 HIGHFIELD ROAD
 City HENRICO State VA Zip Code 23229-7756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358534
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HEMMY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13130 WATERTOWN PLANK ROAD 310
 City ELM GROVE State WI Zip Code 53122-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349544
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2099 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HEMMY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13130 WATERTOWN PLANK ROAD
 310
 City ELM GROVE State WI Zip Code 53122-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380358
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. HEMMY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13130 WATERTOWN PLANK ROAD
 310
 City ELM GROVE State WI Zip Code 53122-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380359
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. HEMPEL, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3843 FAWN LN
 City WHITE PLAINS State MD Zip Code 20695-3310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410861
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2100 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HEMPEL, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3843 FAWN LN

City WHITE PLAINS	State MD	Zip Code 20695-3310
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.410863

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. HENDERSON, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3391 PRAIRE TRAIL

City LOGAN	State IA	Zip Code 51546-5113
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2016

Transaction ID : SA11A.392434

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HENDERSON, DANNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201W2NDST

City JUSTIN	State TX	Zip Code 76247-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.413685

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2101 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDERSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1389 SHARON HILL LANE

City DUARTE	State CA	Zip Code 91010-1315
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRANS DIGM	Occupation (for Individual) COO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.396226

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. HENDRICKS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7557 RAMBLER ROAD
820

City DALLAS	State TX	Zip Code 75231-4142
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID P. HENDRICKS, PLLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356327

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. HENDRICKS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7557 RAMBLER ROAD
820

City DALLAS	State TX	Zip Code 75231-4142
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVID P. HENDRICKS, PLLC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.383079

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2102 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7557 RAMBLER ROAD
 820
 City DALLAS State TX Zip Code 75231-4142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID P. HENDRICKS, PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411322
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. HENDRICKSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5257
 City INCLINE VILLAGE State NV Zip Code 89450-5257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352336
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HENDRICKSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5257
 City INCLINE VILLAGE State NV Zip Code 89450-5257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.377485
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2103 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5257
 City INCLINE VILLAGE State NV Zip Code 89450-5257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409058
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368458
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372121
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2104 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 30

City ETNA	State CA	Zip Code 96027-0030
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378813

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HENDRICKS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 30

City ETNA	State CA	Zip Code 96027-0030
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382295

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HENDRICKS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 30

City ETNA	State CA	Zip Code 96027-0030
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
607.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390052

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2105 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 30

City ETNA	State CA	Zip Code 96027-0030
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390061

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

B. HENDRICKS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 30

City ETNA	State CA	Zip Code 96027-0030
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390062

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HENDRICKS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 30

City ETNA	State CA	Zip Code 96027-0030
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
607.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.391995

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2106 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.393819
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394283
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399060
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2107 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404747
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407657
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408447
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2108 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 09 / 24 / 2016
Transaction ID : SA11A.408839
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.415062
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416469
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2109 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDRICKS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 30
 City ETNA State CA Zip Code 96027-0030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 607.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418226
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HENGESBAUGH, MARY-LOUISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 N. GARY AVE.
 City WHEATON State IL Zip Code 60187-4916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411019
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HENGESBAUGH, MARY-LOUISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 N. GARY AVE.
 City WHEATON State IL Zip Code 60187-4916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411020
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2110 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENKEL, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4092 S. WABASH ST.
 City DENVER State CO Zip Code 80237-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366834
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HENKEL, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4092 S. WABASH ST.
 City DENVER State CO Zip Code 80237-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403233
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HENKEL, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4092 S. WABASH ST.
 City DENVER State CO Zip Code 80237-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403253
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2111 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENNINGER, DELMER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34180 CALLE SERENO

City TEMECULA	State CA	Zip Code 92592-9108
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.362841

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HENRIE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5614 LOCKE STREET
107

City WILMINGTON	State NC	Zip Code 28403-1971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE-HITACHI NUCLEAR ENERGY	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350317

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HENRIE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5614 LOCKE STREET
107

City WILMINGTON	State NC	Zip Code 28403-1971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GE-HITACHI NUCLEAR ENERGY	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399290

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2112 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5614 LOCKE STREET
 107
 City WILMINGTON State NC Zip Code 28403-1971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE-HITACHI NUCLEAR ENERGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399294
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HENRIE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5614 LOCKE STREET
 107
 City WILMINGTON State NC Zip Code 28403-1971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE-HITACHI NUCLEAR ENERGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413212
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HENRY, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 OLD RIVER ROAD
 City WILKES BARRE State PA Zip Code 18702-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANK MARTZ COACH COMPANY Occupation (for Individual) CHAIRMAIN EMERITUS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380930
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2113 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRY, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6555 GREEN SPARROW LN
 City N LAS VEGAS State NV Zip Code 89084-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359132
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HENRY, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6555 GREEN SPARROW LN
 City N LAS VEGAS State NV Zip Code 89084-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376271
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HENRY, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6555 GREEN SPARROW LN
 City N LAS VEGAS State NV Zip Code 89084-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383248
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2114 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENRY, TAYLOR, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3965 E LELAND STREET
 City MESA State AZ Zip Code 85215-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379708
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HENSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 W. MAIN ST
 City CAMPBELLSPORT State WI Zip Code 53010-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2016
Transaction ID : SA11A.344231
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HENSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 W. MAIN ST
 City CAMPBELLSPORT State WI Zip Code 53010-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.362044
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2115 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 W. MAIN ST
 City CAMPBELLSPORT State WI Zip Code 53010-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **09 / 03 / 2016**
Transaction ID : SA11A.389231
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HENSHAW, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 BROADFIELD ROAD
 City CHARLOTTE State NC Zip Code 28226-7207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369958
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HENSHAW, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 BROADFIELD ROAD
 City CHARLOTTE State NC Zip Code 28226-7207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2116 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENSHAW, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3408 BROADFIELD ROAD

City CHARLOTTE	State NC	Zip Code 28226-7207
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.404499

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HENSHAW, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3408 BROADFIELD ROAD

City CHARLOTTE	State NC	Zip Code 28226-7207
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415281

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HENSHAW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 561 LIGHTHOUSE WAY

City SANIBEL	State FL	Zip Code 33957-3905
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARDNO	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.363237

Amount of Each Receipt this Period
600.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2117 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENSHAW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 561 LIGHTHOUSE WAY

City SANIBEL	State FL	Zip Code 33957-3905
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARDNO	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372876

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. HENSHAW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 561 LIGHTHOUSE WAY

City SANIBEL	State FL	Zip Code 33957-3905
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARDNO	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372877

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. HENSHAW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 561 LIGHTHOUSE WAY

City SANIBEL	State FL	Zip Code 33957-3905
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARDNO	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386623

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2118 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENSHAW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 561 LIGHTHOUSE WAY

City SANIBEL	State FL	Zip Code 33957-3905
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARDNO	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412813

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HERBERT, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25550 N TUSCARORA COURT

City BARRINGTON	State IL	Zip Code 60010-1140
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.366552

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. HERBERT, CURTIS, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31981 BURNT CEDAR E

City FAIR OAKS RANCH	State TX	Zip Code 78015-4002
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416991

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2119 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERBERT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 EAGLE CREST CT
 City RIVERSIDE State CA Zip Code 92506-7528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST COAST C&C MANAGEMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352087
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION

B. HERBERT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 EAGLE CREST CT
 City RIVERSIDE State CA Zip Code 92506-7528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST COAST C&C MANAGEMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.377476
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION

C. HERBERT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 EAGLE CREST CT
 City RIVERSIDE State CA Zip Code 92506-7528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST COAST C&C MANAGEMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401441
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2120 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERBERT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11407 LAKIN PL.
 City OAKTON State VA Zip Code 22124-1232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APA, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.380068
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HERELEY, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 OLD ORCHARD ROAD
 City HARVARD State IL Zip Code 60033-1847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366253
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HERELEY, DANIEL, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 OLD ORCHARD ROAD
 City HARVARD State IL Zip Code 60033-1847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389862
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2121 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERETH, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2269 E CHEROKEE DR
 City WOODSTOCK State GA Zip Code 30188-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSONBURG HEALTH Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411467
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HERETH, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2269 E CHEROKEE DR
 City WOODSTOCK State GA Zip Code 30188-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSONBURG HEALTH Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411468
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348722
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2122 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350570
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356204
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358040
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2123 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372734
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380441
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382192
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2124 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386132
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386143
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389444
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2125 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397161
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399898
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407648
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2126 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410338
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERMANN, SIGWULF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 W. HAYES ST.
 City SEATTLE State WA Zip Code 98199-4250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415482
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERNDON, DEALEY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2903 TARRY TRAIL
 City AUSTIN State TX Zip Code 78703-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406843
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2127 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERNDON, H DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2903 TARRY TRAIL
 City AUSTIN State TX Zip Code 78703-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376704
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HERNDON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3185 COLLEGE AVE
 City CONWAY State AR Zip Code 72034-7264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES INSURANCE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370495
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HERRBACH, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 LAKESIDE STREET
 City LAPORTE State IN Zip Code 46350-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2128 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERRBACH, RALPH, , ,

Mailing Address **521 LAKESIDE STREET**

City **LAPORTE** State **IN** Zip Code **46350-2239**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **08 / 17 / 2016**

Transaction ID : SA11A.370613

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERRBACH, RALPH, , ,

Mailing Address **521 LAKESIDE STREET**

City **LAPORTE** State **IN** Zip Code **46350-2239**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **08 / 28 / 2016**

Transaction ID : SA11A.382548

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERRBACH, RALPH, , ,

Mailing Address **521 LAKESIDE STREET**

City **LAPORTE** State **IN** Zip Code **46350-2239**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **09 / 04 / 2016**

Transaction ID : SA11A.390741

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2129 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HERRBACH, RALPH, , ,

Mailing Address **521 LAKESIDE STREET**

City **LAPORTE** State **IN** Zip Code **46350-2239**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
09 / 17 / 2016
Transaction ID : SA11A.400176

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HERRBACH, RALPH, , ,

Mailing Address **521 LAKESIDE STREET**

City **LAPORTE** State **IN** Zip Code **46350-2239**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
09 / 28 / 2016
Transaction ID : SA11A.413477

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HERRERA, VAL, , ,

Mailing Address **201 OAKVIEW DR**

City **DOUBLE OAK** State **TX** Zip Code **75077-8418**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **284.00**

Date of Receipt
07 / 20 / 2016
Transaction ID : SA11A.352760

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2130 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359475
 Amount of Each Receipt this Period 34.00
 Memo Item CONTRIBUTION

B. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369890
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386001
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	109.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2131 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403374
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403404
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERRERA, VAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 OAKVIEW DR
 City DOUBLE OAK State TX Zip Code 75077-8418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422655
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2132 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRIMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 BENEDICT RD
 City PITTSFORD State NY Zip Code 14534-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350423
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERRIMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 BENEDICT RD
 City PITTSFORD State NY Zip Code 14534-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368753
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HERRIMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 BENEDICT RD
 City PITTSFORD State NY Zip Code 14534-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391638
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2133 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRIMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 BENEDICT RD
 City PITTSFORD State NY Zip Code 14534-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409717
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HERRING, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1180
 City HIGHLANDS State NC Zip Code 28741-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391917
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. HERRING, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1180
 City HIGHLANDS State NC Zip Code 28741-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391918
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	118.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2134 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRING, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1180

City HIGHLANDS	State NC	Zip Code 28741-1180
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391919

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HERRING, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1180

City HIGHLANDS	State NC	Zip Code 28741-1180
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413540

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HERRMANN, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 PRINCEVILLE AVE

City PRINCEVILLE	State IL	Zip Code 61559-9754
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404664

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2135 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERRMANN, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PRINCEVILLE AVE
 City PRINCEVILLE State IL Zip Code 61559-9754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422612
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HERRMANN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 CANDLEWOOD LANE
 City FLAT ROCK State NC Zip Code 28731-9638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418542
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HERRO, DAVID, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E GOETHE ST APT 3W
 City CHICAGO State IL Zip Code 60610-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS ASSOCIATES Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385231
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2136 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERSHEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1449 GRASSY WAY
 City LANCASTER State PA Zip Code 17601-4573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERSHEY EQUIPMENT CO INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358565
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HERSHBERGER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 NO. MARIENFELD ST. 850
 City MIDLAND State TX Zip Code 79701-4395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357532
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HERSHBERGER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 NO. MARIENFELD ST. 850
 City MIDLAND State TX Zip Code 79701-4395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382804
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2137 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERSHBERGER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 NO. MARIENFELD ST.
850

City MIDLAND State TX Zip Code 79701-4395

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410783

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. HERSHBERGER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 NO. MARIENFELD ST.
850

City MIDLAND State TX Zip Code 79701-4395

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY/FOOTBALL REFEREE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410789

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. HERSLIP, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2052

City MINOT State ND Zip Code 58702-2052

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402713

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2138 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERZINGER, LARRY, , ,

Mailing Address 4514 WINDSWEPT DR

City MILFORD State MI Zip Code 48380-2776

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 / /

Transaction ID : SA11A.352332

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERZINGER, LARRY, , ,

Mailing Address 4514 WINDSWEPT DR

City MILFORD State MI Zip Code 48380-2776

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 / /

Transaction ID : SA11A.375869

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERZINGER, LARRY, , ,

Mailing Address 4514 WINDSWEPT DR

City MILFORD State MI Zip Code 48380-2776

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 / /

Transaction ID : SA11A.396647

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2139 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERZINGER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 WINDSWEPT DR
 City MILFORD State MI Zip Code 48380-2776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401468
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HERZOG, BRIANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 WEST PARKER ROAD
 City PLANO State TX Zip Code 75093-7901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIANT G. HERZOG MDPA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350288
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HERZOG, BRIANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 WEST PARKER ROAD
 City PLANO State TX Zip Code 75093-7901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIANT G. HERZOG MDPA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386799
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2140 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERZOG, BRIANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 WEST PARKER ROAD
 City PLANO State TX Zip Code 75093-7901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIANT G. HERZOG MDPA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386802
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HERZOG, HETTIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 266 LOCHA DRIVE
 City JUPITER State FL Zip Code 33458-7733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391307
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HESSEL, DELONE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12921 RIVER OAKS DRIVE
 City OKLAHOMA CITY State OK Zip Code 73142-5163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHITTON SUPPLY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358562
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2141 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HESSER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 261 HANBURY DR.
 City LAKE ZURICH State IL Zip Code 60047-9790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368519
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HESSER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 261 HANBURY DR.
 City LAKE ZURICH State IL Zip Code 60047-9790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390373
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HESSER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 261 HANBURY DR.
 City LAKE ZURICH State IL Zip Code 60047-9790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412490
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2142 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HETMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15628 GALE AVE
 B37
 City HACIENDA HEIGHTS State CA Zip Code 91745-1516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359867
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

B. HETMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15628 GALE AVE
 B37
 City HACIENDA HEIGHTS State CA Zip Code 91745-1516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384805
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

C. HETMAN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15628 GALE AVE
 B37
 City HACIENDA HEIGHTS State CA Zip Code 91745-1516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419629
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	96.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2143 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEWETT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 JORDAN'S JOURNEY
 City WILLIAMSBURG State VA Zip Code 23185-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408324
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEYWOOD, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12025 154TH PL NE
 City REDMOND State WA Zip Code 98052-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAIYO PACIFIC PARTNERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391325
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. HICKMAM, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008NHERITAGE VIEW CT
 City HILLIARD State OH Zip Code 43026-7614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354517
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2144 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMAM, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008NHERITAGE VIEW CT
 City HILLIARD State OH Zip Code 43026-7614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380028
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HICKMAM, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008NHERITAGE VIEW CT
 City HILLIARD State OH Zip Code 43026-7614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408694
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HICKMAN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4129 S. PAIUTE WAY
 City SIERRA VISTA State AZ Zip Code 85650-8432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358249
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2145 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMAN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4129 S. PAIUTE WAY
 City SIERRA VISTA State AZ Zip Code 85650-8432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364948
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HICKMAN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4129 S. PAIUTE WAY
 City SIERRA VISTA State AZ Zip Code 85650-8432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399308
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HICKMAN, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4129 S. PAIUTE WAY
 City SIERRA VISTA State AZ Zip Code 85650-8432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408602
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2146 OF 5722
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMAN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 BUTLER DRIVE

City LAFAYETTE	State CA	Zip Code 94549-3358
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1331.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.398409

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. HICKMAN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 BUTLER DRIVE

City LAFAYETTE	State CA	Zip Code 94549-3358
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1331.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406285

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HICKMAN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 BUTLER DRIVE

City LAFAYETTE	State CA	Zip Code 94549-3358
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1331.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406287

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2147 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 BUTLER DRIVE
 City LAFAYETTE State CA Zip Code 94549-3358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1331.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422903
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HICKOK, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 NORTHBAY DRIVE
 City MADISON State MS Zip Code 39110-8863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 362.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365742
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. HICKS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8776 WILD DUNES DR.
 City SARASOTA State FL Zip Code 34241-9645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TANKLESS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349555
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 481.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2148 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HICKS, MARGARET, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 COPPERHEAD CIR
 City SAINT AUGUSTINE State FL Zip Code 32092-2751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359960
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HICKS, MARGARET, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 COPPERHEAD CIR
 City SAINT AUGUSTINE State FL Zip Code 32092-2751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398564
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HICKS, MARGARET, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 COPPERHEAD CIR
 City SAINT AUGUSTINE State FL Zip Code 32092-2751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408523
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2149 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGGINBOTHAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 SOUTH LAKE DRIVE 1-B,
 1-B
 City PALM BEACH State FL Zip Code 33480-4525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349532
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HIGGINBOTHAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 SOUTH LAKE DRIVE 1-B,
 1-B
 City PALM BEACH State FL Zip Code 33480-4525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.379035
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HIGGINBOTHAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 SOUTH LAKE DRIVE 1-B,
 1-B
 City PALM BEACH State FL Zip Code 33480-4525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386682
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2150 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGGINBOTHAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 SOUTH LAKE DRIVE 1-B,
 1-B
 City PALM BEACH State FL Zip Code 33480-4525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403355
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HIGGINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 MERION DR.
 City LEAGUE CITY State TX Zip Code 77573-4445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt **07 / 03 / 2016**
Transaction ID : SA11A.344225
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. HIGGINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 MERION DR.
 City LEAGUE CITY State TX Zip Code 77573-4445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt **07 / 03 / 2016**
Transaction ID : SA11A.344226
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	368.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2151 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGGINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 MERION DR.
 City LEAGUE CITY State TX Zip Code 77573-4445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374592
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HIGH, S. DALE, DALE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 10008
 City LANCASTER State PA Zip Code 17605-0008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HIGH COSI Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389383
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HIGHSMITH, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 CROWN VALLEY COURT
 City DANVILLE State CA Zip Code 94506-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DORFMAN PACIFIC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364268
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2152 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGHT, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4814 MIRROR LAKE DRIVE
 City POWDER SPRINGS State GA Zip Code 30127-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D PRINTING, INC Occupation (for Individual) SECRETARY-TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354509
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HIGHT, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4814 MIRROR LAKE DRIVE
 City POWDER SPRINGS State GA Zip Code 30127-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D PRINTING, INC Occupation (for Individual) SECRETARY-TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366805
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HIGHT, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4814 MIRROR LAKE DRIVE
 City POWDER SPRINGS State GA Zip Code 30127-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D PRINTING, INC Occupation (for Individual) SECRETARY-TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.367013
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2153 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGHT, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4814 MIRROR LAKE DRIVE
 City POWDER SPRINGS State GA Zip Code 30127-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D PRINTING, INC Occupation (for Individual) SECRETARY-TREASURER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410190
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HIGHT, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4814 MIRROR LAKE DRIVE
 City POWDER SPRINGS State GA Zip Code 30127-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D PRINTING, INC Occupation (for Individual) SECRETARY-TREASURER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422365
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HIGHT, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4814 MIRROR LAKE DRIVE
 City POWDER SPRINGS State GA Zip Code 30127-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D PRINTING, INC Occupation (for Individual) SECRETARY-TREASURER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422368
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2154 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILDEBRAND, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7417 PINE BLUFF DRIVE.
 City SPRING LAKE State MI Zip Code 49456-9653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARLON METER, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388207
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HILDEBRAND, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7417 PINE BLUFF DRIVE.
 City SPRING LAKE State MI Zip Code 49456-9653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARLON METER, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390536
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HILDEBRAND, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7417 PINE BLUFF DRIVE.
 City SPRING LAKE State MI Zip Code 49456-9653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARLON METER, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397796
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2155 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILDEBRAND, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7417 PINE BLUFF DRIVE.

City SPRING LAKE	State MI	Zip Code 49456-9653
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLON METER, INC.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407579

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HILDEBRAND, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7417 PINE BLUFF DRIVE.

City SPRING LAKE	State MI	Zip Code 49456-9653
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLON METER, INC.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407582

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HILDEBRAND, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7417 PINE BLUFF DRIVE.

City SPRING LAKE	State MI	Zip Code 49456-9653
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLON METER, INC.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412206

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2156 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, ALICE, W., MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 BRIDGEWORTH LANE

City SHERMAN	State CT	Zip Code 06784-1931
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358553

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HILL, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 N FEDERAL HIGHWAY, SUITE 114

City DEERFIELD BEACH	State FL	Zip Code 33441-3621
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LANG REALTY	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399484

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HILL, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 N FEDERAL HIGHWAY, SUITE 114

City DEERFIELD BEACH	State FL	Zip Code 33441-3621
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LANG REALTY	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409795

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2157 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 N FEDERAL HIGHWAY, SUITE 114
 City DEERFIELD BEACH State FL Zip Code 33441-3621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANG REALTY Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409803
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HILL, FRANK, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 NW 41ST STREET
 City OKLAHOMA CITY State OK Zip Code 73118-7030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361338
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HILL, FRANK, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 NW 41ST STREET
 City OKLAHOMA CITY State OK Zip Code 73118-7030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373470
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2158 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1603 BURR RIDGE CLUB DRIVE
 City BURR RIDGE State IL Zip Code 60527-5251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383449
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. HILL, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2415 NO. JACKSON ST
 City LITTLE ROCK State AR Zip Code 72207-3715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380349
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HILL, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2415 NO. JACKSON ST
 City LITTLE ROCK State AR Zip Code 72207-3715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380361
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2159 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2415 NO. JACKSON ST
 City LITTLE ROCK State AR Zip Code 72207-3715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407976
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HILL, JESSIE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1924 W ASHBURY LANE APT 16C
 City INVERNESS State IL Zip Code 60067-4796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414451
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. HILL, JR., AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 HIGHLAND PARK VILLAGE #200
 City DALLAS State TX Zip Code 75205-2786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A.G. HILL PARTNERS Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349229
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2160 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILLENMEYER, LOUIS, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 466 WOODLAKE WAY
 City LEXINGTON State KY Zip Code 40502-2570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389573
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HILLENMEYER, LOUIS, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 466 WOODLAKE WAY
 City LEXINGTON State KY Zip Code 40502-2570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417192
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. HILLMAN, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 SAINT JAMES STREET
 City PITTSBURGH State PA Zip Code 15232-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377602
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2161 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILLMAN, DAVID, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 SAINT JAMES STREET
 City PITTSBURGH State PA Zip Code 15232-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396215
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HILLMAN, DAVID, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1950 OLD GALLOWS ROAD STE 600
 City VIENNA State VA Zip Code 22182-3970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358574
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HILLMAN, TATANLL, LEA, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 W BLEEKER STREET
 City ASPEN State CO Zip Code 81611-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15900.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396192
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2162 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILLMAN, TATANLL, LEA, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 504 W BLEEKER STREET

City ASPEN	State CO	Zip Code 81611-1228
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.396214

Amount of Each Receipt this Period
4400.00

Memo Item
CONTRIBUTION

B. HILLMAN, TATANLL, LEA, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 504 W BLEEKER STREET

City ASPEN	State CO	Zip Code 81611-1228
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412535

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

C. HILSINGER, ARTHUR, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8 JACKSON POND ROAD

City DEDHAM	State MA	Zip Code 02026-5524
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383460

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2163 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILTON, JOYCE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 599 CAWLEY DRIVE
UNIT 3A

City FREDERICK State MD Zip Code 21703-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2016

Transaction ID : SA11A.346895

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HILTON, JOYCE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 599 CAWLEY DRIVE
UNIT 3A

City FREDERICK State MD Zip Code 21703-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359459

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HILTON, JOYCE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 599 CAWLEY DRIVE
UNIT 3A

City FREDERICK State MD Zip Code 21703-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359460

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2164 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILTON, JOYCE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 599 CAWLEY DRIVE
UNIT 3A

City FREDERICK State MD Zip Code 21703-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.363193

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HILTON, JOYCE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 599 CAWLEY DRIVE
UNIT 3A

City FREDERICK State MD Zip Code 21703-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016

Transaction ID : SA11A.379886

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HILTON, JOYCE, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 599 CAWLEY DRIVE
UNIT 3A

City FREDERICK State MD Zip Code 21703-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417096

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2165 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILTY, MATTHEW, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 454 9TH ST
 City LAKE OSWEGO State OR Zip Code 97034-2913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVAMERE GROUP, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381555
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HINES, GULMER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 PIPPINPOST DR. F
 City CONWAY State AR Zip Code 72034-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348455
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HINES, GULMER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 PIPPINPOST DR. F
 City CONWAY State AR Zip Code 72034-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362519
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2166 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINES, GULMER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 362 PIPPINPOST DR.
F

City CONWAY State AR Zip Code 72034-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11A.363844

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HINES, GULMER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 362 PIPPINPOST DR.
F

City CONWAY State AR Zip Code 72034-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.422370

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HINKE, OLAV, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5400 SNAPPER CREEK ROAD

City CORAL GABLES State FL Zip Code 33156-3446

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.376957

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2167 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINKLE, ELMER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13251 BODEGA TRL
 City FRISCO State TX Zip Code 75035-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356325
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. HINRICHS, IVAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6000 FAIRVIEW RD., STE. 400 STE.400
 City CHARLOTTE State NC Zip Code 28210-0209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HFCB, LLC Occupation (for Individual) BENEFITS PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352538
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. HINRICHS, IVAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6000 FAIRVIEW RD., STE. 400 STE.400
 City CHARLOTTE State NC Zip Code 28210-0209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HFCB, LLC Occupation (for Individual) BENEFITS PLANNING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358388
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2075.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2168 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINRICHS, IVAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6000 FAIRVIEW RD., STE. 400
 STE.400
 City CHARLOTTE State NC Zip Code 28210-0209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HFCB, LLC Occupation (for Individual) BENIFITS PLANNING
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374249
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HINSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 E DE SOTO ST
 City PENSACOLA State FL Zip Code 32501-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 774.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359921
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. HINSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 E DE SOTO ST
 City PENSACOLA State FL Zip Code 32501-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 774.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384762
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1262.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2169 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HINSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 E DE SOTO ST
 City PENSACOLA State FL Zip Code 32501-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 774.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418378
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HINSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 E DE SOTO ST
 City PENSACOLA State FL Zip Code 32501-3514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 774.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419572
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST. 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385090
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	481.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2170 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385781
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409287
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HIRSCH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 GEARY ST.
 403
 City SAN FRANCISCO State CA Zip Code 94108-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416128
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2171 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF RNERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363123
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF RNERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368487
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF RNERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.375066
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2172 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF RNERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380566

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF RNERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
08 / 31 / 2016

Transaction ID : SA11A.388619

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIRSCH, ROLAND, F., DR.,

Mailing Address **20458 WATERS POINT LANE**

City GERMANTOWN	State MD	Zip Code 20874-1091
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF RNERGY	Occupation (for Individual) SCIENCE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.404387

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2173 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF RNERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407854
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF RNERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414210
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HIRSCH, ROLAND, F., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20458 WATERS POINT LANE
 City GERMANTOWN State MD Zip Code 20874-1091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF RNERGY Occupation (for Individual) SCIENCE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421966
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2174 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HIXON, GEORGE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 W LYNWOOD AVENUE
 City SAN ANTONIO State TX Zip Code 78212-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389385
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. HJALMQUIST, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 FOREST WILLOW CIRCLE
 City EL PASO State TX Zip Code 79922-2906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIZZA PROPERTIES INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.394646
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HLORE, JODIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3141 DAHLIA WAY
 City NAPLES State FL Zip Code 34105-3046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380330
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2175 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HLORE, JODIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3141 DAHLIA WAY
 City NAPLES State FL Zip Code 34105-3046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380331
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 LITTLE HAVEN RD
 City VIRGINIA BEACH State VA Zip Code 23452-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CENTER RADIOLOGIST Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354534
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 LITTLE HAVEN RD
 City VIRGINIA BEACH State VA Zip Code 23452-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CENTER RADIOLOGIST Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379986
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2176 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 LITTLE HAVEN RD
 City VIRGINIA BEACH State VA Zip Code 23452-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CENTER RADIOLOGIST Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408687
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOAGEY, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 PHILLIPS MILL LANE
 City NEWARK State DE Zip Code 19711-7493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347493
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOAGEY, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 PHILLIPS MILL LANE
 City NEWARK State DE Zip Code 19711-7493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366772
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2177 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOAGEY, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 PHILLIPS MILL LANE
 City NEWARK State DE Zip Code 19711-7493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396812
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOAGEY, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 PHILLIPS MILL LANE
 City NEWARK State DE Zip Code 19711-7493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411948
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HOBSON, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4237 ARMSTRONG PARKWAY
 City DALLAS State TX Zip Code 75205-3715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGHSIDE CAPITAL Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417759
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	26100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2178 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOCK, STACY, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3331 WESTLAKE DR
 City AUSTIN State TX Zip Code 78746-1901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHILANTHROPIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **35000.00**

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389378
 Amount of Each Receipt this Period **25000.00**
 Memo Item CONTRIBUTION

B. HODGES, ROY, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 663
 City DUMAS State MS Zip Code 38625-0663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.356586
 Amount of Each Receipt this Period **50.00**
 Memo Item CONTRIBUTION

C. HODGES, ROY, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 663
 City DUMAS State MS Zip Code 38625-0663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.356613
 Amount of Each Receipt this Period **200.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2179 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HODGES, ROY, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 663
 City DUMAS State MS Zip Code 38625-0663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365361
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HODGES, ROY, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 663
 City DUMAS State MS Zip Code 38625-0663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396460
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HODGKINS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2617 LIGHTHOUSE BEND DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407532
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2180 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOEING, CLAIRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 944 BRYANS PLACE RD
 City WINSTON SALEM State NC Zip Code 27104-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410210
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOEING, CLAIRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 944 BRYANS PLACE RD
 City WINSTON SALEM State NC Zip Code 27104-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414074
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOEING, CLAIRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 944 BRYANS PLACE RD
 City WINSTON SALEM State NC Zip Code 27104-5006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2181 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOEKSEMA, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 PINE TREE ROAD
 City WINTER PARK State FL Zip Code 32789-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS PARTNERS LLC Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386351
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOEKSEMA, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 PINE TREE ROAD
 City WINTER PARK State FL Zip Code 32789-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS PARTNERS LLC Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388139
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOEKSEMA, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 PINE TREE ROAD
 City WINTER PARK State FL Zip Code 32789-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS PARTNERS LLC Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397948
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2182 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOEKSEMA, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 PINE TREE ROAD
 City WINTER PARK State FL Zip Code 32789-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS PARTNERS LLC Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404405
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOEKSEMA, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 PINE TREE ROAD
 City WINTER PARK State FL Zip Code 32789-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS PARTNERS LLC Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418362
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HOER, CAROLYN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21988 ANGELI PL
 City GRASS VALLEY State CA Zip Code 95949-8331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385680
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2183 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOER, CAROLYN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21988 ANGELI PL
 City GRASS VALLEY State CA Zip Code 95949-8331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403043
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOER, CAROLYN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21988 ANGELI PL
 City GRASS VALLEY State CA Zip Code 95949-8331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403045
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOER, CAROLYN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21988 ANGELI PL
 City GRASS VALLEY State CA Zip Code 95949-8331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403050
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2184 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFELT, DONN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 789
 City WILLISTON State ND Zip Code 58802-0789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402608
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HOFFELT, DONN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 789
 City WILLISTON State ND Zip Code 58802-0789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407452
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HOFFELT, DONN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 789
 City WILLISTON State ND Zip Code 58802-0789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407453
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2185 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFELT, DONN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 789
 City WILLISTON State ND Zip Code 58802-0789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422257
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348590
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368429
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2186 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381978
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381981
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HOFFMAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAWYER HILL ROAD
 City BERLIN State MA Zip Code 01503-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398693
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2187 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, CURTIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 120 SAWYER HILL ROAD
City BERLIN State MA Zip Code 01503-1703
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414297
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. HOFFMAN, FREDERIC, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2 DOGWOOD CIRCLE
City MYERSTOWN State PA Zip Code 17067-1700
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) A & H IND Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364489
Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. HOFFMAN, FREDERIC, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2 DOGWOOD CIRCLE
City MYERSTOWN State PA Zip Code 17067-1700
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) A & H IND Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417419
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2188 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, ILENE, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2099 PACIFIC BLVD #211
 City SAN MATEO State CA Zip Code 94403-5705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE INC Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390163
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOFFMAN, ILENE, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2099 PACIFIC BLVD #211
 City SAN MATEO State CA Zip Code 94403-5705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE INC Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404674
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOFFMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 20TH STREET SOUTH 1412
 City ARLINGTON State VA Zip Code 22202-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEATHER PODESTA+PARTNERS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385609
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2189 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFFMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 20TH STREET SOUTH
 1412
 City ARLINGTON State VA Zip Code 22202-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEATHER PODESTA+PARTNERS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385613
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOFMANN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 S OCEAN BLVD 10A
 City BOCA RATON State FL Zip Code 33432-8373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349269
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOFMANN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 S OCEAN BLVD 10A
 City BOCA RATON State FL Zip Code 33432-8373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363753
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2190 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOFMANN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 S OCEAN BLVD 10A
 City BOCA RATON State FL Zip Code 33432-8373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374706
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOFMANN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 S OCEAN BLVD 10A
 City BOCA RATON State FL Zip Code 33432-8373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399684
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOGAN, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15491 ESTANCIA LANE
 City WELLINGTON State FL Zip Code 33414-7408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENTAIR Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355725
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2191 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGAN, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15491 ESTANCIA LANE
 City WELLINGTON State FL Zip Code 33414-7408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENTAIR Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380765
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOGAN, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15491 ESTANCIA LANE
 City WELLINGTON State FL Zip Code 33414-7408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENTAIR Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.408009
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOGAN, RILEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1704 COTTAGE WAY COURT
 City BRANDON State FL Zip Code 33510-2658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397121
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2192 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGGE, WINTERS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1651 TORY ROAD

City PAGELAND	State SC	Zip Code 29728-5580
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCREWMATICS OF S.C.	Occupation (for Individual) SHOP OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372294

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HOGGE, WINTERS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1651 TORY ROAD

City PAGELAND	State SC	Zip Code 29728-5580
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCREWMATICS OF S.C.	Occupation (for Individual) SHOP OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384196

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HOGGE, WINTERS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1651 TORY ROAD

City PAGELAND	State SC	Zip Code 29728-5580
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCREWMATICS OF S.C.	Occupation (for Individual) SHOP OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384198

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2193 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGGE, WINTERS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1651 TORY ROAD

City PAGELAND	State SC	Zip Code 29728-5580
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCREWMATICS OF S.C.	Occupation (for Individual) SHOP OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386194

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HOGGE, WINTERS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1651 TORY ROAD

City PAGELAND	State SC	Zip Code 29728-5580
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCREWMATICS OF S.C.	Occupation (for Individual) SHOP OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399950

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HOGUE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18716 WAINSBOROUGH LANE

City DALLAS	State TX	Zip Code 75287-5525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
643.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344374

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	206.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2194 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGUE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18716 WAINSBOROUGH LANE
 City DALLAS State TX Zip Code 75287-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 643.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359012
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. HOGUE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18716 WAINSBOROUGH LANE
 City DALLAS State TX Zip Code 75287-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 643.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387877
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. HOHORST, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 RIVERSIDE AVENUE APT 10G
 City RED BANK State NJ Zip Code 07701-1076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346303
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 512.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2195 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLDEN, J., S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44434 ASPEN RIDGE DRIVE
 City NORTHVILLE State MI Zip Code 48168-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.356542
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOLDER, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 ASHFORD DR
 City CHADDS FORD State PA Zip Code 19317-8231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTRAZENECA Occupation (for Individual) SUPPLY CHAINMANAGET
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408519
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOLDER, RANDOLPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 TAHOE BLVD APT 802
 City INCLINE VILLAGE State NV Zip Code 89451-9488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLANKE BROADCASTING Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.367969
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2196 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLDEN, RONALD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1910 GULF SHORE BLVD N
207

City NAPLES State FL Zip Code 34102-4696

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372662

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HOLDEN, RONALD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1910 GULF SHORE BLVD N
207

City NAPLES State FL Zip Code 34102-4696

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.383703

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HOLDEN, RONALD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1910 GULF SHORE BLVD N
207

City NAPLES State FL Zip Code 34102-4696

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.405445

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2197 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLEKAMP, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 BARCLAY WOODS
 City SAINT LOUIS State MO Zip Code 63124-1108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360253
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. HOLEKAMP, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 BARCLAY WOODS
 City SAINT LOUIS State MO Zip Code 63124-1108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360252
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. HOLGUIN, CHENO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9318 NE BURTON RD
 City VANCOUVER State WA Zip Code 98662-7444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBEW Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356260
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2198 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLINKA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14411 SHELTER LN
 City HAYMARKET State VA Zip Code 20169-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.422524
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOLKEBOER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2109 BROADWAY 8-157
 City NEW YORK State NY Zip Code 10023-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MUSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349238
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOLKEBOER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2109 BROADWAY 8-157
 City NEW YORK State NY Zip Code 10023-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MUSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.391213
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2199 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HOLKEBOER, DAVID, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016 Transaction ID : SA11A.391215
Mailing Address 2109 BROADWAY 8-157		Amount of Each Receipt this Period 200.00
City NEW YORK	State NY	Zip Code 10023-2138
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MUSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HOLKEBOER, DAVID, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016 Transaction ID : SA11A.391218
Mailing Address 2109 BROADWAY 8-157		Amount of Each Receipt this Period 50.00
City NEW YORK	State NY	Zip Code 10023-2138
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MUSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HOLLAND, ZOE, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016 Transaction ID : SA11A.383927
Mailing Address 8650 FLINTWOOD RD		Amount of Each Receipt this Period 50.00
City PARKER	State CO	Zip Code 80138-6719
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HOLLAND SIGNS INC	Occupation (for Individual) OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2200 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLAND, ZOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 FLINTWOOD RD
 City PARKER State CO Zip Code 80138-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLAND SIGNS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOLLAND, ZOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 FLINTWOOD RD
 City PARKER State CO Zip Code 80138-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLAND SIGNS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOLLAND, ZOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 FLINTWOOD RD
 City PARKER State CO Zip Code 80138-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLAND SIGNS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390176
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2201 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLAND, ZOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8650 FLINTWOOD RD

City PARKER	State CO	Zip Code 80138-6719
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOLLAND SIGNS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390177

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HOLLAND, ZOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8650 FLINTWOOD RD

City PARKER	State CO	Zip Code 80138-6719
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOLLAND SIGNS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.399075

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HOLLEY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3978 CYPRESS SHORES DR. N

City MOBILE	State AL	Zip Code 36619-9714
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.353977

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2202 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLINGER, H. THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 QUAIL CROSSING RD
 City WILMINGTON State DE Zip Code 19807-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWTON ONE ADVISORS, LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.347206
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HOLLIDAY, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 N BENSON AVE
 City UPLAND State CA Zip Code 91786-2166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLLIDAY ROCK Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346080
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. HOLLINGTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2724 SHELLEY ROAD
 City SHAKER HEIGHTS State OH Zip Code 44122-2732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358703
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	27000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2203 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLOWAY, ANNA, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2770 STATE UNIVERSITY DRIVE
 City FORT VALLEY State GA Zip Code 31030-6910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389407
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HOLLOWAY, ANNA, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2770 STATE UNIVERSITY DRIVE
 City FORT VALLEY State GA Zip Code 31030-6910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391746
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HOLLOWAY, ANNA, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2770 STATE UNIVERSITY DRIVE
 City FORT VALLEY State GA Zip Code 31030-6910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408317
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2204 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLOWAY, ANNA, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2770 STATE UNIVERSITY DRIVE
 City FORT VALLEY State GA Zip Code 31030-6910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422470
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. HOLLOWAY, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 RED OAK LANE
 City ALBANY State GA Zip Code 31701-1350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383576
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOLLOWAY, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 RED OAK LANE
 City ALBANY State GA Zip Code 31701-1350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392067
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2205 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLOWAY, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 RED OAK LANE
 City ALBANY State GA Zip Code 31701-1350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403772
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. HOLLOWAY, DAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 RED OAK LANE
 City ALBANY State GA Zip Code 31701-1350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403879
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. HOLLOWAY, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2416 N ATLANTIC BLVD
 City FORT LAUDERDALE State FL Zip Code 33305-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7501.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.384919
 Amount of Each Receipt this Period 5001.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5151.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2206 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLOWAY, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2416 N ATLANTIC BLVD
 City FORT LAUDERDALE State FL Zip Code 33305-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7501.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397922
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. HOLLOWAY, RONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2031 WINDFIELD DRIVE
 City MONROE State GA Zip Code 30655-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RONDA HOLLOWAY, CPA PC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365902
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. HOLLOWAY, RONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2031 WINDFIELD DRIVE
 City MONROE State GA Zip Code 30655-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RONDA HOLLOWAY, CPA PC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396978
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2207 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMAN, LUMAN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1528

City JACKSONVILLE	State TX	Zip Code 75766-1528
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : SA11A.347852

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

B. HOLMAN, LUMAN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1528

City JACKSONVILLE	State TX	Zip Code 75766-1528
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11A.376616

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

C. HOLMAN, ROBERT, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 JASMINE STREET

City DENVER	State CO	Zip Code 80220-5915
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11A.377059

Amount of Each Receipt this Period
 500.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2208 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MONUMENT HILL TRL
 City GEORGETOWN State TX Zip Code 78633-5389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349890
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HOLMES, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MONUMENT HILL TRL
 City GEORGETOWN State TX Zip Code 78633-5389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353422
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HOLMES, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MONUMENT HILL TRL
 City GEORGETOWN State TX Zip Code 78633-5389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381930
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2209 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MONUMENT HILL TRL
 City GEORGETOWN State TX Zip Code 78633-5389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383925
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOLMES, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MONUMENT HILL TRL
 City GEORGETOWN State TX Zip Code 78633-5389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.398932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOLMES, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 MONUMENT HILL TRL
 City GEORGETOWN State TX Zip Code 78633-5389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 26 / 2016
Transaction ID : SA11A.408059
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2210 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, JERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 MONUMENT HILL TRL

City GEORGETOWN	State TX	Zip Code 78633-5389
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410777

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HOLMES, JERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 MONUMENT HILL TRL

City GEORGETOWN	State TX	Zip Code 78633-5389
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410825

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HOLMES, JERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 MONUMENT HILL TRL

City GEORGETOWN	State TX	Zip Code 78633-5389
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415663

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2211 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLMES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 GULF OF MEXICO DRIVE
 SUITE 292
 City LONGBOAT KEY State FL Zip Code 34228-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402550
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HOLMES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 GULF OF MEXICO DRIVE
 SUITE 292
 City LONGBOAT KEY State FL Zip Code 34228-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402551
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HOLSENBECK, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 LANA LANE
 City HOUSTON State TX Zip Code 77027-5606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406762
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2212 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLSTED, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 SE 223RD AVE., #302
 City GRESHAM State OR Zip Code 97030-2559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362207
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. HOLSTED, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 SE 223RD AVE., #302
 City GRESHAM State OR Zip Code 97030-2559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381905
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOLSTED, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 SE 223RD AVE., #302
 City GRESHAM State OR Zip Code 97030-2559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381906
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2213 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLSTED, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 SE 223RD AVE., #302
 City GRESHAM State OR Zip Code 97030-2559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381915
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOLSTED, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 SE 223RD AVE., #302
 City GRESHAM State OR Zip Code 97030-2559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381918
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOLSTED, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 SE 223RD AVE., #302
 City GRESHAM State OR Zip Code 97030-2559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381919
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2214 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLSTED, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1545 SE 223RD AVE., #302

City GRESHAM	State OR	Zip Code 97030-2559
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398223

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HOLSWADE, SANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45456 ESPINAZO STREET

City INDIAN WELLS	State CA	Zip Code 92210-6162
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.361955

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HOLSWADE, SANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45456 ESPINAZO STREET

City INDIAN WELLS	State CA	Zip Code 92210-6162
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399995

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2215 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLSWADE, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45456 ESPINAZO STREET
 City INDIAN WELLS State CA Zip Code 92210-6162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399996
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOLT, ALYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 HESSIAN WAY
 City CHERRY HILL State NJ Zip Code 08003-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEST Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404487
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOLT, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ORANGE STREET
 City CHARLESTON State SC Zip Code 29401-2407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396399
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2216 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLTHUS, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1404 ROAD 11
 City YORK State NE Zip Code 68467-7514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364890
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. HOLTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUNNINGDALE DR
 City SAINT LOUIS State MO Zip Code 63124-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357267
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. HOLTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUNNINGDALE DR
 City SAINT LOUIS State MO Zip Code 63124-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357268
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2217 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUNNINGDALE DR
 City SAINT LOUIS State MO Zip Code 63124-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379906
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOLTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUNNINGDALE DR
 City SAINT LOUIS State MO Zip Code 63124-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOLTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUNNINGDALE DR
 City SAINT LOUIS State MO Zip Code 63124-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386690
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2218 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUNNINGDALE DR
 City SAINT LOUIS State MO Zip Code 63124-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402890
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOLTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUNNINGDALE DR
 City SAINT LOUIS State MO Zip Code 63124-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402891
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOLTON, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 RIVERHILL DR
 City VALDOSTA State GA Zip Code 31602-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355360
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2219 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLTON, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 RIVERHILL DR
 City VALDOSTA State GA Zip Code 31602-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408150
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOLTON, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 RIVERHILL DR
 City VALDOSTA State GA Zip Code 31602-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408156
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOLTON, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2312 RIVERHILL DR
 City VALDOSTA State GA Zip Code 31602-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408157
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2220 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLTZMAN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 204

City MOUNT JACKSON State VA Zip Code 22842-0204

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOLTZMAN OIL CORP Occupation (for Individual) PETROLEUM DISTRIBUTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365919

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. HOMAN, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4714 FOXHALL CRESCENT NW

City WASHINGTON State DC Zip Code 20007-1050

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368749

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. HOMET, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4180 CHESTNUT AVE

City LONG BEACH State CA Zip Code 90807-1902

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359890

Amount of Each Receipt this Period 131.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 631.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2221 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOMET, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4180 CHESTNUT AVE
 City LONG BEACH State CA Zip Code 90807-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384774
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. HOMET, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4180 CHESTNUT AVE
 City LONG BEACH State CA Zip Code 90807-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOMET, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4180 CHESTNUT AVE
 City LONG BEACH State CA Zip Code 90807-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419625
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 362.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2222 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOMMES, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 LANEWOOD LANE
 City PLYMOUTH State MN Zip Code 55446-4543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386337
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HONEYCUTT, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 650
 City CABOOL State MO Zip Code 65689-0650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347937
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HOOBYAR, JOSEPH, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5522 PARK AVENUE
 City HINSDALE State IL Zip Code 60521-5019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLKSWAGON OF ORLANDO PARK Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387675
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2223 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOD, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 WILDCAT PT.
 City SPRINGFIELD State IL Zip Code 62711-7813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372365
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOOD, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 WILDCAT PT.
 City SPRINGFIELD State IL Zip Code 62711-7813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403351
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOOD, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9300 POPLAR RIDGE LANE
 City EVANSVILLE State IN Zip Code 47720-7198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379438
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2224 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 MARSHALLFIELD LN.
A

City REDONDO BEACH	State CA	Zip Code 90278-4272
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.360167

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HOOD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 MARSHALLFIELD LN.
A

City REDONDO BEACH	State CA	Zip Code 90278-4272
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386584

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HOOD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 MARSHALLFIELD LN.
A

City REDONDO BEACH	State CA	Zip Code 90278-4272
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386602

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2225 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 MARSHALLFIELD LN.
 A
 City REDONDO BEACH State CA Zip Code 90278-4272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386605
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOOD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 MARSHALLFIELD LN.
 A
 City REDONDO BEACH State CA Zip Code 90278-4272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387860
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HOOD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 MARSHALLFIELD LN.
 A
 City REDONDO BEACH State CA Zip Code 90278-4272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402697
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2226 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOD, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1919 MARSHALLFIELD LN.
A
City REDONDO BEACH State CA Zip Code 90278-4272
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402699
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOOK, OLIVER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2308 LOMA PRIETA LANE
City MENLO PARK State CA Zip Code 94025-6717
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389459
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOOKER, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2049
City ALBANY State TX Zip Code 76430-8001
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363148
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2227 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HOOKER, ALICE, , ,		Date of Receipt MM / DD / YYYY 08 / 16 / 2016
Mailing Address PO BOX 2049		Transaction ID : SA11A.368636
City ALBANY	State TX	Zip Code 76430-8001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HOOKER, ALICE, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address PO BOX 2049		Transaction ID : SA11A.370512
City ALBANY	State TX	Zip Code 76430-8001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HOOKER, ALICE, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2016
Mailing Address PO BOX 2049		Transaction ID : SA11A.398147
City ALBANY	State TX	Zip Code 76430-8001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2228 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOKER, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2049
 City ALBANY State TX Zip Code 76430-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398177
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD LN
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352642
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD LN
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.358482
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2229 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD LN
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388234
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD LN
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.390917
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD LN
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.402348
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2230 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD LN
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419333
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOOKER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 NASHWOOD LN
 City DALLAS State TX Zip Code 75244-7732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422202
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 548
 City FONTANA State CA Zip Code 92334-0548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMER BOLT Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347466
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2231 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 548

City FONTANA	State CA	Zip Code 92334-0548
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMER BOLT	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349451

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 548

City FONTANA	State CA	Zip Code 92334-0548
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMER BOLT	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349455

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 548

City FONTANA	State CA	Zip Code 92334-0548
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMER BOLT	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352169

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2232 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOPER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 548
 City FONTANA State CA Zip Code 92334-0548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMER BOLT Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382356
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370589
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374416
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2233 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384340
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384344
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390628
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2234 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401347
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HOOVEL, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 CALDWELL LANE
 City GENEVA State IL Zip Code 60134-4484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407494
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HOOVER, MARY, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3131 SIMPSON STREET, APT S303
 City EVANSTON State IL Zip Code 60201-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356537
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2235 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPE, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 COLONY PARK DR
 City SAVANNAH State GA Zip Code 31406-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350431
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HOPE, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 COLONY PARK DR
 City SAVANNAH State GA Zip Code 31406-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363746
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HOPE, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 COLONY PARK DR
 City SAVANNAH State GA Zip Code 31406-3714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366856
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2236 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPE, PHIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 COLONY PARK DR

City SAVANNAH	State GA	Zip Code 31406-3714
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2016

Transaction ID : SA11A.375793

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HOPE, PHIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 COLONY PARK DR

City SAVANNAH	State GA	Zip Code 31406-3714
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2016

Transaction ID : SA11A.415231

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HOPE, PHIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 COLONY PARK DR

City SAVANNAH	State GA	Zip Code 31406-3714
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Transaction ID : SA11A.422512

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2237 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPKINS, BRYANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 36TH ROAD N.
 City ARLINGTON State VA Zip Code 22207-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359376
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOPKINS, BRYANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 36TH ROAD N.
 City ARLINGTON State VA Zip Code 22207-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369501
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOPKINS, BRYANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 36TH ROAD N.
 City ARLINGTON State VA Zip Code 22207-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.412637
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2238 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 193 PIONEER PASSAGE

City BASTROP	State TX	Zip Code 78602-3602
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372194

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HOPKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 193 PIONEER PASSAGE

City BASTROP	State TX	Zip Code 78602-3602
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410447

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HOPPE, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 560, BOX 557

City APO	State AP	Zip Code 96376-0006
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US ARMY	Occupation (for Individual) MEDICAL TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.354779

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2239 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPPE, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PSC 560, BOX 557
 City APO State AP Zip Code 96376-0006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) MEDICAL TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.354781
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOPPE, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PSC 560, BOX 557
 City APO State AP Zip Code 96376-0006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) MEDICAL TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375703
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. HOPPE, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22701 LAKE ROAD 515A
 City ROCKY RIVER State OH Zip Code 44116-1058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347357
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2240 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPPE, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22701 LAKE ROAD
 515A
 City ROCKY RIVER State OH Zip Code 44116-1058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349610
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HOPPE, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22701 LAKE ROAD
 515A
 City ROCKY RIVER State OH Zip Code 44116-1058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359871
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. HOPPE, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22701 LAKE ROAD
 515A
 City ROCKY RIVER State OH Zip Code 44116-1058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384790
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	143.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2241 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOPPE, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22701 LAKE ROAD
 515A
 City ROCKY RIVER State OH Zip Code 44116-1058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419634
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. HORAN, JOAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 FONTANA STREET
 City LEAWOOD State KS Zip Code 66224-3645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358580
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. HORAN, JOAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 FONTANA STREET
 City LEAWOOD State KS Zip Code 66224-3645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369319
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 294.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2242 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORAN, MICHAEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4766 DIAMOND WOODS LANE
 City SPRINGFIELD State MO Zip Code 65809-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OMS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389433
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

B. HORN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 MOUNDS ROAD APT 604
 City SAN MATEO State CA Zip Code 94402-1292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378188
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HORN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 S ENGLISH STATION RD
 City LOUISVILLE State KY Zip Code 40299-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL DAVIS RESTORATION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1850.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2243 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 S ENGLISH STATION RD
 City LOUISVILLE State KY Zip Code 40299-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL DAVIS RESTORATION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414112
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HORN, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 S ENGLISH STATION RD
 City LOUISVILLE State KY Zip Code 40299-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAUL DAVIS RESTORATION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419467
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HORNBACK, CLYDE, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 908
 City KEMAH State TX Zip Code 77565-0908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363579
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2244 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORNBACK, CLYDE, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 908
 City KEMAH State TX Zip Code 77565-0908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414708
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HORNER, ANDREW, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNS LAKE CIRCLE
 City DALLAS State TX Zip Code 75230-1900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417214
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HORNER, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 ORCHID POINT WAY
 City VERO BEACH State FL Zip Code 32963-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368435
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2245 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORNER, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 ORCHID POINT WAY
 City VERO BEACH State FL Zip Code 32963-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383717
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HORNER, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 ORCHID POINT WAY
 City VERO BEACH State FL Zip Code 32963-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419512
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HORNING, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 EDINBURGH VILLAGE DR.
 City DAYTON State OH Zip Code 45458-4169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MFG. REP.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 04 / 2016
Transaction ID : SA11A.344198
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 535.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2246 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORNSTEIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WESTWOOD LANE
 City WOODBURY State NY Zip Code 11797-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL CREDIT ADVISERS Occupation (for Individual) CHIEF INVESTMENT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355693
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HORNSTEIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WESTWOOD LANE
 City WOODBURY State NY Zip Code 11797-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL CREDIT ADVISERS Occupation (for Individual) CHIEF INVESTMENT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374812
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HORNSTEIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WESTWOOD LANE
 City WOODBURY State NY Zip Code 11797-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL CREDIT ADVISERS Occupation (for Individual) CHIEF INVESTMENT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382220
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2247 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ROUND COVE RD
 City CHATHAM State MA Zip Code 02633-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402621
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HORTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ROUND COVE RD
 City CHATHAM State MA Zip Code 02633-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402631
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HORTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ROUND COVE RD
 City CHATHAM State MA Zip Code 02633-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411216
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2248 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ROUND COVE RD
 City CHATHAM State MA Zip Code 02633-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413497
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. HORTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ROUND COVE RD
 City CHATHAM State MA Zip Code 02633-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414925
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357482
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2249 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD
 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382797
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD
 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385924
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HORVATH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 BURR OAK RD
 115A
 City HINSDALE State IL Zip Code 60521-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385927
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2250 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORVATH, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1409 BURR OAK RD
115A

City HINSDALE State IL Zip Code 60521-2911

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.385928

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HORVATH, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1409 BURR OAK RD
115A

City HINSDALE State IL Zip Code 60521-2911

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.410092

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HORVATH, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1409 BURR OAK RD
115A

City HINSDALE State IL Zip Code 60521-2911

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.413030

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2251 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HORVATH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2144 BOSTON COURT
 C
 City INDIANAPOLIS State IN Zip Code 46228-6358
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365783
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HORVATH, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2144 BOSTON COURT
 C
 City INDIANAPOLIS State IN Zip Code 46228-6358
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419818
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HORWATT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10668 EASTBORNE AVE.
 207
 City LOS ANGELES State CA Zip Code 90024-5979
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) GENERAL NETWORKS CORPORATION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401550
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2252 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOSKINS, BERTHA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 SPINNAKER COURT
 City RESTON State VA Zip Code 20191-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405714
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HOSKINS, BERTHA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 SPINNAKER COURT
 City RESTON State VA Zip Code 20191-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405727
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOSKINS, BERTHA, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 SPINNAKER COURT
 City RESTON State VA Zip Code 20191-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405728
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2253 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOSSA, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2311 JANSSEN AVE

City CHUCAGO	State IL	Zip Code 60614-3019
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICL	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352479

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HOSSA, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2311 JANSSEN AVE

City CHUCAGO	State IL	Zip Code 60614-3019
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICL	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.377491

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HOSSA, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2311 JANSSEN AVE

City CHUCAGO	State IL	Zip Code 60614-3019
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ICL	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401514

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2254 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HOSTAGE, MICHAEL, , ,

Mailing Address 35 GLEN COURT

City SOUTHBOROUGH State MA Zip Code 01772-1845

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 / /
Transaction ID : SA11A.368741

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HOSTAGE, MICHAEL, , ,

Mailing Address 35 GLEN COURT

City SOUTHBOROUGH State MA Zip Code 01772-1845

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 / /
Transaction ID : SA11A.386394

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HOSTAGE, MICHAEL, , ,

Mailing Address 35 GLEN COURT

City SOUTHBOROUGH State MA Zip Code 01772-1845

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 / /
Transaction ID : SA11A.386411

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2255 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOSTETLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1967
 City NOKOMIS State FL Zip Code 34274-1967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378620
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HOTH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 RIVERBEND DRIVE
 City ADVANCE State NC Zip Code 27006-8530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355246
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOTH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 RIVERBEND DRIVE
 City ADVANCE State NC Zip Code 27006-8530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362964
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2256 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOTH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 RIVERBEND DRIVE
 City ADVANCE State NC Zip Code 27006-8530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.369057
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOTH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 RIVERBEND DRIVE
 City ADVANCE State NC Zip Code 27006-8530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380643
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOTH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 RIVERBEND DRIVE
 City ADVANCE State NC Zip Code 27006-8530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.414182
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2257 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOTH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 RIVERBEND DRIVE
 City ADVANCE State NC Zip Code 27006-8530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415413
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOUNTZ, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 N MOON RANCH PL
 City MARANA State AZ Zip Code 85658-4536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347617
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOUNTZ, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 N MOON RANCH PL
 City MARANA State AZ Zip Code 85658-4536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366751
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2258 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUNTZ, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 N MOON RANCH PL
 City MARANA State AZ Zip Code 85658-4536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396803
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOUSE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 VISTA LAKES DRIVE
 City FLEMING ISLAND State FL Zip Code 32003-7312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354483
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOUSE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 VISTA LAKES DRIVE
 City FLEMING ISLAND State FL Zip Code 32003-7312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379992
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2259 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSE, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1970 VISTA LAKES DRIVE

City FLEMING ISLAND	State FL	Zip Code 32003-7312
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408665

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HOUSER, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 888 SW 5TH AVE STE 300

City PORTLAND	State OR	Zip Code 97204-2017
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BULLIVANT HOUSER	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358522

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. HOUSER, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 S 14TH AVENUE

City LEBANON	State PA	Zip Code 17042-8805
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397027

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2260 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSTON, REAGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 790390
 City SAN ANTONIO State TX Zip Code 78279-0390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373550
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352331
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375894
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2261 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394056
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401486
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOUSTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9843 WADING CRANE AVE.
 City MCCORDSVILLE State IN Zip Code 46055-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA HOSPITAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413776
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2262 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOVDE, ERIC, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 W WASHINGTON AVE STE 350
 City MADISON State WI Zip Code 53703-2758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOVDE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.398480
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. HOWARD, BILL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1619 SANFORD AVE
 City RICHLAND State WA Zip Code 99354-2745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416410
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HOWARD, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2450 QUINTARA STREET
 City SAN FRANCISCO State CA Zip Code 94116-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361432
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2263 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2450 QUINTARA STREET
 City SAN FRANCISCO State CA Zip Code 94116-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365247
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HOWARD, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 471
 City MORGANTOWN State KY Zip Code 42261-0471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358603
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOWARD, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 471
 City MORGANTOWN State KY Zip Code 42261-0471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376576
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2264 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 471
 City MORGANTOWN State KY Zip Code 42261-0471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397067
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOWARD, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 471
 City MORGANTOWN State KY Zip Code 42261-0471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417271
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HOWARD, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 LOBLOLLY LANE
 City CHOUDRANT State LA Zip Code 71227-4804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOODVALE INTERIORS Occupation (for Individual) INTERIOR DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394576
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2265 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, FAITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 3096
 City LYNNWOOD State WA Zip Code 98046-3096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEATTLE PUBLIC SCHOOLS Occupation (for Individual) OFFICE SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372278
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOWARD, FAITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 3096
 City LYNNWOOD State WA Zip Code 98046-3096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEATTLE PUBLIC SCHOOLS Occupation (for Individual) OFFICE SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398260
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOWARD, FAITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 3096
 City LYNNWOOD State WA Zip Code 98046-3096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEATTLE PUBLIC SCHOOLS Occupation (for Individual) OFFICE SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398277
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2266 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, FAITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 3096
 City LYNWOOD State WA Zip Code 98046-3096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEATTLE PUBLIC SCHOOLS Occupation (for Individual) OFFICE SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398281
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357449
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359072
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2267 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364993
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370214
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370217
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2268 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370219
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382519
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382520
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2269 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391118
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414220
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HOWARD, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 HERITAGE COURT
 City MELBOURNE State FL Zip Code 32940-6817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414223
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2270 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 BLUEBERRY LN

City DARIEN	State CT	Zip Code 06820-2509
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AQR CAPITAL MANAGEMENT	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407159

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. HOWARD, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7653 WOODVIEW COURT

City EDINA	State MN	Zip Code 55439-1768
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348943

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HOWARD, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7653 WOODVIEW COURT

City EDINA	State MN	Zip Code 55439-1768
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350361

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2271 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7653 WOODVIEW COURT

City EDINA	State MN	Zip Code 55439-1768
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368953

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HOWARD, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7653 WOODVIEW COURT

City EDINA	State MN	Zip Code 55439-1768
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2016

Transaction ID : SA11A.398768

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HOWARD-NORDAN, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 EAGLE POINT

City HOUSTON	State AL	Zip Code 35572-2160
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
309.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2016

Transaction ID : SA11A.404403

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2272 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1048 ENCINO ROW
 City CORONADO State CA Zip Code 92118-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344345
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. HOWARD, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1048 ENCINO ROW
 City CORONADO State CA Zip Code 92118-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364360
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOWARD, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1048 ENCINO ROW
 City CORONADO State CA Zip Code 92118-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.406225
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2273 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWARD, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1048 ENCINO ROW
 City CORONADO State CA Zip Code 92118-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418631
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HOWARD, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13340 INWOOD DR.
 City BEAUMONT State TX Zip Code 77713-9478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356249
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. HOWELL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 MILL POINTE DR. S. E.
 City MILL CREEK State WA Zip Code 98012-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359700
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2274 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWELL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 MILL POINTE DR. S. E.
 City MILL CREEK State WA Zip Code 98012-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386895
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HOWELL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1907 MILL POINTE DR. S. E.
 City MILL CREEK State WA Zip Code 98012-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419380
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HOWERTON, KATHY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1476
 City RANCHO SANTA FE State CA Zip Code 92067-1476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARS NATIONAL SERVICES, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368639
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2275 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWERTON, KATHY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1476
 City RANCHO SANTA FE State CA Zip Code 92067-1476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARS NATIONAL SERVICES, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398301
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOWERTON, KATHY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1476
 City RANCHO SANTA FE State CA Zip Code 92067-1476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARS NATIONAL SERVICES, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415798
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HOWES, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 RHAPSODY BEND DR
 City THE WOODLANDS State TX Zip Code 77382-2000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEWARK RESOURCES Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413890
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2276 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWES, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1025
 City SIOUX FALLS State SD Zip Code 57101-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) I90 FUEL SERVICES INC. Occupation (for Individual) PETRO DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411117
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOWSER, DONALD, E., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5609 SADDLE RIDGE DR
 City COLUMBIA State MO Zip Code 65203-9786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381570
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. HOYER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PINE NEEDLE RD.
 City WAYLAND State MA Zip Code 01778-4415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387052
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2277 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOYER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 PINE NEEDLE RD.
 City WAYLAND State MA Zip Code 01778-4415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419217
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOYME, KERMIT, D., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12730 S 82ND AVENUE
 City PALOS PARK State IL Zip Code 60464-2044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383543
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HOYT, JOHN, T., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 CENTRAL STREET
 City RANDOLPH State VT Zip Code 05060-1039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383258
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2278 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016
Transaction ID : SA11A.348271
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.353995
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359610
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2279 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359611
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364947
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391234
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2280 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HUANG, SUE, , ,		Date of Receipt MM / DD / YYYY 09 / 08 / 2016
Mailing Address 8533 AVON ST		Transaction ID : SA11A.391758
City JAMAICA	State NY	Zip Code 11432-2303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 819.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUANG, SUE, , ,		Date of Receipt MM / DD / YYYY 09 / 16 / 2016
Mailing Address 8533 AVON ST		Transaction ID : SA11A.398556
City JAMAICA	State NY	Zip Code 11432-2303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 819.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUANG, SUE, , ,		Date of Receipt MM / DD / YYYY 09 / 16 / 2016
Mailing Address 8533 AVON ST		Transaction ID : SA11A.398557
City JAMAICA	State NY	Zip Code 11432-2303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 819.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2281 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533 AVON ST

City JAMAICA	State NY	Zip Code 11432-2303
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401297

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. HUANG, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533 AVON ST

City JAMAICA	State NY	Zip Code 11432-2303
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401298

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. HUANG, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533 AVON ST

City JAMAICA	State NY	Zip Code 11432-2303
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411425

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2282 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533 AVON ST

City JAMAICA	State NY	Zip Code 11432-2303
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411426

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533 AVON ST

City JAMAICA	State NY	Zip Code 11432-2303
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418132

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HUANG, SUE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8533 AVON ST

City JAMAICA	State NY	Zip Code 11432-2303
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
819.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418133

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2283 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420189
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUANG, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8533 AVON ST
 City JAMAICA State NY Zip Code 11432-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420191
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUBBARD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 HABERSHAM PLACE
 City CARROLLTON State GA Zip Code 30117-4152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389468
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2284 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBBARD, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **681 DEPTFORD AVE**

City DAYTON	State OH	Zip Code 45429-5940
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
07 / 14 / 2016

Transaction ID : SA11A.347555

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HUBBARD, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **681 DEPTFORD AVE**

City DAYTON	State OH	Zip Code 45429-5940
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416446

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HUBBARD, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **681 DEPTFORD AVE**

City DAYTON	State OH	Zip Code 45429-5940
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
680.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416447

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2285 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBBARD, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 MIAMI ROAD
 City CINCINNATI State OH Zip Code 45243-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361505
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HUBBARD, STANLEY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3415 UNIVERSITY AVE
 City ST. PAUL State MN Zip Code 55114-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HBC INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379106
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. HUBER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 W 100 N
 City WINAMAC State IN Zip Code 46996-8010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369326
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2286 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBER, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18108 BASKIN FARM DR.
 City WILDWOOD State MO Zip Code 63038-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOTCHURBACK, LLC Occupation (for Individual) TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 08 / 09 / 2016
Transaction ID : SA11A.363750
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HUBER, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18108 BASKIN FARM DR.
 City WILDWOOD State MO Zip Code 63038-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOTCHURBACK, LLC Occupation (for Individual) TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410257
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HUBER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12708 FORK RD
 City FORK State MD Zip Code 21051-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 07 / 28 / 2016
Transaction ID : SA11A.357590
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	377.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2287 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUBER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12708 FORK RD
 City FORK State MD Zip Code 21051-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372860
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HUBER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12708 FORK RD
 City FORK State MD Zip Code 21051-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398391
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HUCKABY, CLARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5903 HIGHLAND HILLS TRAIL
 City AUSTIN State TX Zip Code 78731-4024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NURSE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348372
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2288 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUCKLE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 HARRIS TRL
 City CADILLAC State MI Zip Code 49601-8945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11A.346921
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUDGINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18601 CYPRESS ROSEHILL
 City CYPRESS State TX Zip Code 77429-1197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386311
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HUDGINS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18601 CYPRESS ROSEHILL
 City CYPRESS State TX Zip Code 77429-1197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386312
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2289 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUDSON, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 NAUTILUS AVE

City LAKEWAY	State TX	Zip Code 78738-1006
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410317

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HUDSON, GREGORY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 DANCES BAY RD

City ELIZABETH CITY	State NC	Zip Code 27909-9178
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VMG	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387746

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. HUDSON, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1571 CRESCENT DRIVE

City ANCHORAGE	State AK	Zip Code 99508-5009
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) POTELCOM SUPPLY	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
373.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392818

Amount of Each Receipt this Period
373.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	673.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2290 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUDSON, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 BELLE MEADE ISLAND DRIVE
 City MIAMI State FL Zip Code 33138-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORWAND INTERNATIONAL Occupation (for Individual) CHARITY VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387962
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUDSON, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 BELLE MEADE ISLAND DRIVE
 City MIAMI State FL Zip Code 33138-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORWAND INTERNATIONAL Occupation (for Individual) CHARITY VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387963
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HUDSON, WILLIAM, N., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 670 LAGOON RD
 City VERO BEACH State FL Zip Code 32963-2259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUDSON ADVISER SERVICES Occupation (for Individual) INVESTMENT ADVISER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385238
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2291 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUDSON, WILLIAM, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6117 WESTWIND DRIVE
 City GREENSBORO State NC Zip Code 27410-4973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417099
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. HUEBNER, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 CAMELLIA COURT
 City LINCOLN State NE Zip Code 68516-1059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381220
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HUELSKAMP, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 NIBLICK LANE
 City LITTLETON State CO Zip Code 80123-6621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERRICK Occupation (for Individual) ENGINEERING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411823
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2292 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUEMPFNER, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 JACK LEG LN
 City BOZEMAN State MT Zip Code 59715-0619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAKOTA WALL SYSTEMS, INC. Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378872
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUESING, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 LADERA WAY
 City CARMICHAEL State CA Zip Code 95608-1574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 06 / 2016**
Transaction ID : SA11A.345919
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUESING, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 LADERA WAY
 City CARMICHAEL State CA Zip Code 95608-1574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356383
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2293 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUESING, JACQUELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
08 / 06 / 2016

Transaction ID : SA11A.363349

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. HUESING, JACQUELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.390672

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. HUESING, JACQUELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.416395

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2294 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUESING, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 LADERA WAY
 City CARMICHAEL State CA Zip Code 95608-1574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416396
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HUESING, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 LADERA WAY
 City CARMICHAEL State CA Zip Code 95608-1574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419800
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUFFARD, JAY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 HAVEMEYER LANE 32
 City STAMFORD State CT Zip Code 06902-2153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364842
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2295 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUFFARD, JAY, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 HAVEMEYER LANE
32

City STAMFORD State CT Zip Code 06902-2153

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.413180

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. HUFFARD, JAY, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 HAVEMEYER LANE
32

City STAMFORD State CT Zip Code 06902-2153

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.413196

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HUGE, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5311 PROCTOR ROAD

City SARASOTA State FL Zip Code 34233-3826

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417172

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2296 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1329 SHERWOOD ROAD
 City GLENVIEW State IL Zip Code 60025-2334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISCOVER Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383541
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HUGHES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 CUTLASS
 City LAKEWAY State TX Zip Code 78734-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350048
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HUGHES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 CUTLASS
 City LAKEWAY State TX Zip Code 78734-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374583
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2297 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 CUTLASS
 City LAKEWAY State TX Zip Code 78734-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383611
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUGHES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 CUTLASS
 City LAKEWAY State TX Zip Code 78734-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411626
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. HUGHES, LAWRENCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 KONA BAY RD
 City MOULTONBOROUGH State NH Zip Code 03254-4106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378299
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2298 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5809 GOVERNORS VIEW LN
City ALEXANDRIA State VA Zip Code 22310-2356
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384831
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HUGHES, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5809 GOVERNORS VIEW LN
City ALEXANDRIA State VA Zip Code 22310-2356
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408089
Amount of Each Receipt this Period 600.00
 Memo Item CONTRIBUTION

C. HUGHES, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5316 TOPEKA DR
City TARZANA State CA Zip Code 91356-3931
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366128
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 825.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2299 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5316 TOPEKA DR
 City TARZANA State CA Zip Code 91356-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUGHES, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5316 TOPEKA DR
 City TARZANA State CA Zip Code 91356-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397666
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUGHES, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5316 TOPEKA DR
 City TARZANA State CA Zip Code 91356-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.416940
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2300 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUGHES, THOMAS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2220
 City TULSA State OK Zip Code 74101-2220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUGHES LUMBER Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417041
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HUH, ROSEMARY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6347 WERK ROAD
 City CINCINNATI State OH Zip Code 45248-2924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346236
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HUIZENGA, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1298 WAUKAZOO DRIVE
 City HOLLAND State MI Zip Code 49424-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368205
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2301 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUIZENGA, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1298 WAUKAZOO DRIVE
 City HOLLAND State MI Zip Code 49424-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402887
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUIZENGA, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1298 WAUKAZOO DRIVE
 City HOLLAND State MI Zip Code 49424-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418415
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HUIZENGA, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1298 WAUKAZOO DRIVE
 City HOLLAND State MI Zip Code 49424-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420092
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2302 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HULAC, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2786 DIAMOND DRIVE
 City CAMARILLO State CA Zip Code 93010-7496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365924
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HULBERT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 FLANDERSVILLE ROAD
 City CATHLAMET State WA Zip Code 98612-9541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389514
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HULL, PAMELA, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 SPRUCE AVENUE
 City LAKE FOREST State IL Zip Code 60045-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360974
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2303 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HULL, PAMELA, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 SPRUCE AVENUE
 City LAKE FOREST State IL Zip Code 60045-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414553
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HULL, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3355 WEST ALABAMA, SUITE 1145
 City HOUSTON State TX Zip Code 77098-1759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376050
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HULL, ROBBI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3804 PEAK LOOKOUT DR
 City AUSTIN State TX Zip Code 78738-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399069
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2304 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HULL, ROBBI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3804 PEAK LOOKOUT DR
 City AUSTIN State TX Zip Code 78738-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399070
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. HULL, ROBBI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3804 PEAK LOOKOUT DR
 City AUSTIN State TX Zip Code 78738-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399244
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HULSE, DARCEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3598
 City ALPINE State WY Zip Code 83128-0598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397004
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2305 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUMPHRIES, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4445 GULF PINES DRIVE
 City SANIBEL State FL Zip Code 33957-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380952
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HUNDERSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 SW SHORELINE DRIVE, APT 125
 City PALM CITY State FL Zip Code 34990-4543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365430
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HUNT, ALVARO, T., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 CITRUS ROAD
 City NEW ORLEANS State LA Zip Code 70123-2043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FORENSIC PATHOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370179
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2306 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUNT, ALVARO, T., DR.,

Mailing Address 302 CITRUS ROAD

City NEW ORLEANS	State LA	Zip Code 70123-2043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FORENSIC PATHOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.381165

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUNT, ALVARO, T., DR.,

Mailing Address 302 CITRUS ROAD

City NEW ORLEANS	State LA	Zip Code 70123-2043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FORENSIC PATHOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

Transaction ID : SA11A.392596

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUNT, ALVARO, T., DR.,

Mailing Address 302 CITRUS ROAD

City NEW ORLEANS	State LA	Zip Code 70123-2043
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FORENSIC PATHOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11A.407141

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2307 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNT, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CEDAR SPRINGS ROAD
 SUITE 1600
 City DALLAS State TX Zip Code 75201-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE ROSEWOOD CORPORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.391987
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUNT, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 CEDAR SPRINGS ROAD
 SUITE 1600
 City DALLAS State TX Zip Code 75201-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE ROSEWOOD CORPORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.391989
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HUNT, N., K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 EUCLID AVENUE
 City DALLAS State TX Zip Code 75205-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363555
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2308 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNT, NORMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 EUCLID AVENUE
 City DALLAS State TX Zip Code 75205-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) VINTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392883
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

B. HUNT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 I ST NW STE 550
 City WASHINGTON State DC Zip Code 20005-5993
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358519
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. HUNT, STEPHEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 S JOYCE ST APT 1401 1401
 City ARLINGTON State VA Zip Code 22202-1883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347550
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	13000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2309 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTER, CHASE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 232 SAPPHIRE STREET
City ANDERSON State SC Zip Code 29626-6913
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377888
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUNTER, HOLLAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2360 YUCCA DR
City CAMARILLO State CA Zip Code 93012-8250
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ST. AUGUSTINE ACADEMY Occupation (for Individual) TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 02 / 2016
Transaction ID : SA11A.344248
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HUNTER, HOLLAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2360 YUCCA DR
City CAMARILLO State CA Zip Code 93012-8250
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ST. AUGUSTINE ACADEMY Occupation (for Individual) TEACHER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353333
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2310 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTER, HOLLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2360 YUCCA DR
 City CAMARILLO State CA Zip Code 93012-8250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. AUGUSTINE ACADEMY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.375706
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HUNTER, HOLLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2360 YUCCA DR
 City CAMARILLO State CA Zip Code 93012-8250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. AUGUSTINE ACADEMY Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.404196
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HUNTER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24554 MAGNOLIA WAY
 City MORGAN HILL State CA Zip Code 95037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390099
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2311 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24554 MAGNOLIA WAY
 City MORGAN HILL State CA Zip Code 95037-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390107
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HUNTER, LINDA, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1627 E KRAMER STREET
 City MESA State AZ Zip Code 85203-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.362073
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HUNTER, LINDA, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1627 E KRAMER STREET
 City MESA State AZ Zip Code 85203-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364380
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2312 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTER, LINDA, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1627 E KRAMER STREET

City MESA	State AZ	Zip Code 85203-2147
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406723

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HUNTINGTON, LOUIS, H., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 820 PARK ROW # 501

City SALINAS	State CA	Zip Code 93901-2406
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTINGTON FARMS	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.361129

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. HUNTLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 327

City NORTHPORT	State NY	Zip Code 11768-0327
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420114

Amount of Each Receipt this Period
113.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	363.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2313 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTLEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 327

City NORTHPORT	State NY	Zip Code 11768-0327
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422046

Amount of Each Receipt this Period
113.00

Memo Item
CONTRIBUTION

B. HUNTSMAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39500 CHERRY OAK CANYON RD

City CHERRY VALLEY	State CA	Zip Code 92223-5835
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350930

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. HUNTSMAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39500 CHERRY OAK CANYON RD

City CHERRY VALLEY	State CA	Zip Code 92223-5835
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374743

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	263.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2314 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNTSMAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39500 CHERRY OAK CANYON RD
 City CHERRY VALLEY State CA Zip Code 92223-5835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399745
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. HUPP, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 DAWN AVE
 City GLEN ELLYN State IL Zip Code 60137-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379102
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. HURST, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3718 FAIRWAYS COURT
 City FREDERICKSBURG State VA Zip Code 22408-0236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MGMT CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379749
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2315 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURST, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3718 FAIRWAYS COURT

City FREDERICKSBURG	State VA	Zip Code 22408-0236
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MGMT CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
359.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390514

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. HURST, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3718 FAIRWAYS COURT

City FREDERICKSBURG	State VA	Zip Code 22408-0236
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MGMT CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
359.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.409048

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. HURT, PATTY, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10035 SUGAR HILL DRIVE

City HOUSTON	State TX	Zip Code 77042-1539
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358773

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2316 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURT, PATTY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10035 SUGAR HILL DRIVE
 City HOUSTON State TX Zip Code 77042-1539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364464
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HURTADO, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHELLEY AVE F
 City CAMPBELL State CA Zip Code 95008-7078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355434
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HURTADO, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHELLEY AVE F
 City CAMPBELL State CA Zip Code 95008-7078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380755
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2317 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HURTADO, GUILLERMO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHELLEY AVE
 F
 City CAMPBELL State CA Zip Code 95008-7078
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) COBHAM Occupation (for Individual) THECNICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407994
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.346058
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364241
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2318 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365637
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380545
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380555
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2319 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390193
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402477
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HUSBY, PAUL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 LA BARRANCA DRIVE
 City SEDONA State AZ Zip Code 86351-6936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414783
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2320 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUSTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6010 CLUB OAKS DRIVE
 City DALLAS State TX Zip Code 75248-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WELLS FARGO ADVISORS FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356611
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. HUTCHISON, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4543 E. ANAHEIM STREET
 City LONG BEACH State CA Zip Code 90804-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PARAGON EQUITIES MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362373
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. HUTCHISON, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4543 E. ANAHEIM STREET
 City LONG BEACH State CA Zip Code 90804-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PARAGON EQUITIES MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2016
Transaction ID : SA11A.389146
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2321 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTCHINSON, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9563 SE SANDPINE LANE
 City HOBE SOUND State FL Zip Code 33455-6356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MYTASKIT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410812
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HUTCHINSON, RICHARD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GREY GULL ROAD
 City JAMESTOWN State RI Zip Code 02835-2808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362787
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HUTCHISON, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4102 55TH AVE NE
 City SEATTLE State WA Zip Code 98105-4946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIMONY FUND FOR ARTS & SCIENCES Occupation (for Individual) EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367929
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2322 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTH, MIRIAM, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 475 FOURTH FAIRWAY DRIVE
R.1

City ROSWELL	State GA	Zip Code 30076-3565
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2964.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2016

Transaction ID : SA11A.351198

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. HUTH, MIRIAM, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 475 FOURTH FAIRWAY DRIVE
R.1

City ROSWELL	State GA	Zip Code 30076-3565
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2964.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.369267

Amount of Each Receipt this Period
257.00

Memo Item
CONTRIBUTION

C. HUTH, MIRIAM, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 475 FOURTH FAIRWAY DRIVE
R.1

City ROSWELL	State GA	Zip Code 30076-3565
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2964.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381084

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1357.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2323 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTH, MIRIAM, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 475 FOURTH FAIRWAY DRIVE
R.1

City ROSWELL State GA Zip Code 30076-3565

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2964.00

Date of Receipt
09 / 12 / 2016
Transaction ID : SA11A.392717

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. HUTH, MIRIAM, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 475 FOURTH FAIRWAY DRIVE
R.1

City ROSWELL State GA Zip Code 30076-3565

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2964.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11A.400408

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HUTSENPILLER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13647 GATEWAY DR

City VICTORVILLE State CA Zip Code 92392-8324

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) VETERINARIAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348881

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2324 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTSENPILLER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13647 GATEWAY DR
 City VICTORVILLE State CA Zip Code 92392-8324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) VETERINARIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372739
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HUTSENPILLER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13647 GATEWAY DR
 City VICTORVILLE State CA Zip Code 92392-8324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) VETERINARIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399835
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HUTTA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 SILVER LN
 City GAHANNA State OH Zip Code 43230-4574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAMES T HUTTA DDS Occupation (for Individual) ORTHODONTIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386185
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2325 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTTON, GAIL, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16761 CORAL CAY LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-2906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352356
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HUTTON, GAIL, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16761 CORAL CAY LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-2906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375876
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HUTTON, GAIL, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16761 CORAL CAY LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-2906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401476
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2326 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HWNDRIXKSON, JAMEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5207
 City INCLINE VILLAGE State NV Zip Code 89450-5207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397730
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HWNDRIXKSON, JAMEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5207
 City INCLINE VILLAGE State NV Zip Code 89450-5207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397731
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HYDE, OLIN, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 MAJOR GINTER COURT
 City RICHMOND State VA Zip Code 23227-3354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350723
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2327 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HYDE, OLIN, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 MAJOR GINTER COURT
 City RICHMOND State VA Zip Code 23227-3354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378626
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HYDE, OLIN, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 MAJOR GINTER COURT
 City RICHMOND State VA Zip Code 23227-3354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412965
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HYDE, OLIN, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 MAJOR GINTER COURT
 City RICHMOND State VA Zip Code 23227-3354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412982
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2328 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HYDE, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6922 WOODSTREAM TERRACE

City SEABROOK	State MD	Zip Code 20706-2144
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016
Transaction ID : SA11A.348947

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. HYDE, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6922 WOODSTREAM TERRACE

City SEABROOK	State MD	Zip Code 20706-2144
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016
Transaction ID : SA11A.366587

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. HYDE, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6922 WOODSTREAM TERRACE

City SEABROOK	State MD	Zip Code 20706-2144
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016
Transaction ID : SA11A.366588

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2329 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HYDE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6922 WOODSTREAM TERRACE
 City SEABROOK State MD Zip Code 20706-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372763
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. HYDE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6922 WOODSTREAM TERRACE
 City SEABROOK State MD Zip Code 20706-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399858
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. HYDUKE, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 GULF STREAM COURT
 City LAS VEGAS State NV Zip Code 89113-1355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALDEC, INC. Occupation (for Individual) GENERAL MANAGER/OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412204
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2330 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HYMA, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8530 LA MESA BLVD SUITE 306

City LA MESA	State CA	Zip Code 91942-0967
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFS WEALTH ADVISORS, INC	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398977

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. HYNES, KEITH, STEVEN, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3331 CREEKVIEW DRIVE

City BONITA SPRINGS	State FL	Zip Code 34134-2625
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.374064

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. HYSON, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 SABRINA TERRACE

City CORONA DEL MAR	State CA	Zip Code 92625-1820
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397414

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2331 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IANNUCCI, MADELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 VASSAR AVENUE
 City SWARTHMORE State PA Zip Code 19081-2018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. IANNUCCI, MADELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 VASSAR AVENUE
 City SWARTHMORE State PA Zip Code 19081-2018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418134
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. IBERLE, JOHN, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 OAK STREET
 City WINNETKA State IL Zip Code 60093-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ISAR INVESTMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360282
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2332 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ICE, LANNY, , ,

Mailing Address **1311 S MURRAY AVE**

City MONAHANS	State TX	Zip Code 79756-6305
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
07 / 26 / 2016

Transaction ID : SA11A.355766

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ICE, LANNY, , ,

Mailing Address **1311 S MURRAY AVE**

City MONAHANS	State TX	Zip Code 79756-6305
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380759

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ICE, LANNY, , ,

Mailing Address **1311 S MURRAY AVE**

City MONAHANS	State TX	Zip Code 79756-6305
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
09 / 26 / 2016

Transaction ID : SA11A.407992

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2333 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ICENOGL, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3415 W. HORIZON AVE.
 City SPOKANE State WA Zip Code 99208-8493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394378
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ICENOGL, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3415 W. HORIZON AVE.
 City SPOKANE State WA Zip Code 99208-8493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418274
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ICENOGL, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3415 W. HORIZON AVE.
 City SPOKANE State WA Zip Code 99208-8493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418277
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2334 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IDICULA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6015 PATRICIA PLACE
 City WEEKI WACHEE State FL Zip Code 34607-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376669
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. INGLIS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4719 GREEN RIVER COURT NE
 City MARIETTA State GA Zip Code 30068-4869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392819
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 232.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345862
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5532.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2335 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386472
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. INGLIS, WILLIAM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 WICKER BASKET CT
 City COLUMBIA State MD Zip Code 21044-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403059
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. INGRAM, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50058
 City NASHVILLE State TN Zip Code 37205-0058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INGRAM INDUSTRIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.402091
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2336 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. INMAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 BROADWAY
 City DENVER State CO Zip Code 80202-4927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405794
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. INSINGA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4601 BIG ROCK DRIVE
 City WILMINGTON State DE Zip Code 19802-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415609
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. INSKEEP, WILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002 IRIS DRIVE
 City STERLING State CO Zip Code 80751-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396204
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2337 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IOSIVAS, MIHAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 ANAPALAU PLACE
 City HONOLULU State HI Zip Code 96825-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TORA TRADING SERVICES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350639
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. IOSIVAS, MIHAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 ANAPALAU PLACE
 City HONOLULU State HI Zip Code 96825-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TORA TRADING SERVICES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363117
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. IOSIVAS, MIHAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 ANAPALAU PLACE
 City HONOLULU State HI Zip Code 96825-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TORA TRADING SERVICES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374643
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2338 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IOSIVAS, MIHAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 ANAPALAU PLACE
 City HONOLULU State HI Zip Code 96825-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 TORA TRADING SERVICES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399688
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. IOVINO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 THIRD AVENUE SUIT 3101
 City NEW YORK State NY Zip Code 10017-2024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 OHL NORTH AMERICA PROFESSIONAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413253
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. IRBY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4027 HILLSBORO PIKE SUITE 803
 City NASHVILLE State TN Zip Code 37215-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 IRBY INVESTMENTS, LLC INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349476
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2339 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRBY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4027 HILLSBORO PIKE
 SUITE 803
 City NASHVILLE State TN Zip Code 37215-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IRBY INVESTMENTS, LLC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405236
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. IRELAND, CHARLES, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 815
 City MYRTLE CREEK State OR Zip Code 97457-0116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS N IRELAND INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.367900
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. IRVINE, JOHN, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6360 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391016
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2340 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRVIN, TINSLEY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 HEADWATERS LANE
 City CLAYTON State GA Zip Code 30525-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378347
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. ISAACS, V., A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 INVERNESS DR E
 City ENGLEWOOD State CO Zip Code 80112-5519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.361551
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. ISENHOUR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1237 W HENDERSON STREET
 City SALISBURY State NC Zip Code 28144-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406840
 Amount of Each Receipt this Period
 350.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2341 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISHIDA, TAKUYA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8209 RENNES COURT

City LAS VEGAS	State NV	Zip Code 89131-4322
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAN OUT CO LTD	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.362809

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. ISHIDA, TAKUYA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8209 RENNES COURT

City LAS VEGAS	State NV	Zip Code 89131-4322
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAN OUT CO LTD	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.396555

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. ISLIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10411 SE TERRAPIN PL
C-109

City TEQUESTA	State FL	Zip Code 33469-1584
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362405

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2342 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ISLIN, JOHN, , ,

Mailing Address **10411 SE TERRAPIN PL
C-109**

City **TEQUESTA** State **FL** Zip Code **33469-1584**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
09 / 22 / 2016

Transaction ID : SA11A.402417

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ISON, GEORGE, , ,

Mailing Address **469 SCENIC DR.**

City **SOUTH PITTSBURG** State **TN** Zip Code **37380-7283**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **491.00**

Date of Receipt
07 / 22 / 2016

Transaction ID : SA11A.353218

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ISON, GEORGE, , ,

Mailing Address **469 SCENIC DR.**

City **SOUTH PITTSBURG** State **TN** Zip Code **37380-7283**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **491.00**

Date of Receipt
07 / 31 / 2016

Transaction ID : SA11A.359131

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2343 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.359988
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363767
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366727
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2344 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISON, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 469 SCENIC DR.

City SOUTH PITTSBURG	State TN	Zip Code 37380-7283
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
491.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.373293

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ISON, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 469 SCENIC DR.

City SOUTH PITTSBURG	State TN	Zip Code 37380-7283
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
491.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2016

Transaction ID : SA11A.374148

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. ISON, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 469 SCENIC DR.

City SOUTH PITTSBURG	State TN	Zip Code 37380-7283
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
491.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : SA11A.388443

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2345 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.409130
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.409760
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.409762
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2346 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 469 SCENIC DR.
 City SOUTH PITTSBURG State TN Zip Code 37380-7283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417792
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ISOTALO, LEO, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 PEACOCK DRIVE
 City SAN RAFAEL State CA Zip Code 94901-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406007
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ISOTALO, LEO, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 PEACOCK DRIVE
 City SAN RAFAEL State CA Zip Code 94901-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407528
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2347 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ISOTALO, LEO, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 PEACOCK DRIVE
 City SAN RAFAEL State CA Zip Code 94901-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420278
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ISOTALO, LEO, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 PEACOCK DRIVE
 City SAN RAFAEL State CA Zip Code 94901-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420279
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ISRAEL, RONEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 OAK VALLEY LANE
 City PURCHASE State NY Zip Code 10577-1145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421204
 Amount of Each Receipt this Period 7700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2348 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVERSON, DEREK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14420 SE 216TH ST

City KENT	State WA	Zip Code 98042-3022
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357153

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. IVERSON, DEREK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14420 SE 216TH ST

City KENT	State WA	Zip Code 98042-3022
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357154

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. IVERSON, DEREK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14420 SE 216TH ST

City KENT	State WA	Zip Code 98042-3022
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372424

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2349 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVERSON, DEREK, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14420 SE 216TH ST
 City KENT State WA Zip Code 98042-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415679
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352523
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355482
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2350 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355483
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405131
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405140
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2351 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405142
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405144
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. IVERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MERIAM STREET
 City LEXINGTON State MA Zip Code 02420-3525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405145
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2352 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380416
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380418
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382334
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2353 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401374
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405069
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. IVESTER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 463 SUNRISE CIRCLE
 City CORNELIA State GA Zip Code 30531-3834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410681
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2354 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IZZO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4506 MYSTIQUE WAY NE

City ROSWELL	State GA	Zip Code 30075-2087
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADB CABLE INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.374406

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. IZZO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4506 MYSTIQUE WAY NE

City ROSWELL	State GA	Zip Code 30075-2087
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADB CABLE INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.405559

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. IZZO, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4506 MYSTIQUE WAY NE

City ROSWELL	State GA	Zip Code 30075-2087
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADB CABLE INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.405571

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2355 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JABLECKI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2759 COSTEBELLE DRIVE
 City LA JOLLA State CA Zip Code 92037-3518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF CALIFORNIA SAN DIEGO Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370364
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. JABLECKI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2759 COSTEBELLE DRIVE
 City LA JOLLA State CA Zip Code 92037-3518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF CALIFORNIA SAN DIEGO Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397559
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. JABS, JACOB, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8545 COVE CT
 City LONE TREE State CO Zip Code 80124-8503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN FURNITURE WAREHOUSE Occupation (for Individual) FURNITURE DEALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.356860
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2356 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JACKMAN, NELLIE, E., ,		Date of Receipt MM / DD / YYYY 08 / 18 / 2016
Mailing Address 45 CORTE YOLANDA		Transaction ID : SA11A.371053
City MORAGA	State CA	Zip Code 94556-1625
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JACKMAN, NELLIE, E., ,		Date of Receipt MM / DD / YYYY 08 / 23 / 2016
Mailing Address 45 CORTE YOLANDA		Transaction ID : SA11A.377098
City MORAGA	State CA	Zip Code 94556-1625
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JACKMAN, NELLIE, E., ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 45 CORTE YOLANDA		Transaction ID : SA11A.381071
City MORAGA	State CA	Zip Code 94556-1625
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2357 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKMAN, NELLIE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CORTE YOLANDA
 City MORAGA State CA Zip Code 94556-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401699
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JACKMAN, NELLIE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 CORTE YOLANDA
 City MORAGA State CA Zip Code 94556-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409621
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. JACKSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029-7219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING COMMUNICATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359057
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2358 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029-7219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.375050
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. JACKSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029-7219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378766
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. JACKSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 VIA LOMA VISTA
 City ESCONDIDO State CA Zip Code 92029-7219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405045
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

45.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2359 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3243 VIA LOMA VISTA

City ESCONDIDO	State CA	Zip Code 92029-7219
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARKETING COMMUNICATIONS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405374

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. JACKSON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3243 VIA LOMA VISTA

City ESCONDIDO	State CA	Zip Code 92029-7219
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MARKETING COMMUNICATIONS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418435

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 169 KINGFISHER CIR

City POOLER	State GA	Zip Code 31322-9763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1982.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349635

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2360 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. JACKSON, ELIZABETH, ANN, MS.,

Mailing Address 169 KINGFISHER CIR

City POOLER	State GA	Zip Code 31322-9763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1982.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355567

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. JACKSON, ELIZABETH, ANN, MS.,

Mailing Address 169 KINGFISHER CIR

City POOLER	State GA	Zip Code 31322-9763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1982.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355580

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. JACKSON, ELIZABETH, ANN, MS.,

Mailing Address 169 KINGFISHER CIR

City POOLER	State GA	Zip Code 31322-9763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1982.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368861

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2361 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JACKSON, ELIZABETH, ANN, MS.,

Mailing Address **169 KINGFISHER CIR**

City POOLER	State GA	Zip Code 31322-9763
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1982.00

Date of Receipt
08 / 17 / 2016

Transaction ID : SA11A.369919

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JACKSON, ELIZABETH, ANN, MS.,

Mailing Address **169 KINGFISHER CIR**

City POOLER	State GA	Zip Code 31322-9763
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1982.00

Date of Receipt
08 / 25 / 2016

Transaction ID : SA11A.379915

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JACKSON, ELIZABETH, ANN, MS.,

Mailing Address **169 KINGFISHER CIR**

City POOLER	State GA	Zip Code 31322-9763
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1982.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380558

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2362 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384323
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384333
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386825
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2363 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391764
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397959
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397961
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2364 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397973
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397976
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401537
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2365 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401538
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408352
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411221
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2366 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411624
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411759
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412969
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2367 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416222
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JACKSON, ELIZABETH, ANN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KINGFISHER CIR
 City POOLER State GA Zip Code 31322-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1982.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418279
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JACKSON, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 641 ST CROIX ST
 City HENDERSON State NV Zip Code 89012-7271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354439
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2368 OF 5722
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, JOLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3335 LUCINDA STREET
 City SAN DIEGO State CA Zip Code 92106-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380488
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JACKSON, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 BARBE DR
 City WESTWEGO State LA Zip Code 70094-5408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JACKSON OFFSHORE OPERATORS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.346114
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. JACKSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 79340
 City CHARLOTTE State NC Zip Code 28271-7063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.376525
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2369 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, SHARON, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 VISTA ENTRADA
 City NEWPORT BEACH State CA Zip Code 92660-3938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORLD TRAVEL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354753
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. JACKSON, SHARON, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 VISTA ENTRADA
 City NEWPORT BEACH State CA Zip Code 92660-3938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORLD TRAVEL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357195
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. JACKSON, SHARON, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 VISTA ENTRADA
 City NEWPORT BEACH State CA Zip Code 92660-3938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORLD TRAVEL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366690
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2370 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, SHARON, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2143 VISTA ENTRADA

City NEWPORT BEACH	State CA	Zip Code 92660-3938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD TRAVEL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378918

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. JACKSON, SHARON, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2143 VISTA ENTRADA

City NEWPORT BEACH	State CA	Zip Code 92660-3938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD TRAVEL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.383165

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JACKSON, SHARON, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2143 VISTA ENTRADA

City NEWPORT BEACH	State CA	Zip Code 92660-3938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD TRAVEL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.396804

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2371 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, SHARON, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2143 VISTA ENTRADA

City NEWPORT BEACH	State CA	Zip Code 92660-3938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD TRAVEL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403629

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. JACKSON, SHARON, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2143 VISTA ENTRADA

City NEWPORT BEACH	State CA	Zip Code 92660-3938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD TRAVEL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408174

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JACKSON, SHARON, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2143 VISTA ENTRADA

City NEWPORT BEACH	State CA	Zip Code 92660-3938
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORLD TRAVEL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418014

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2372 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACKSON, WELLS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 534 LAKEWOOD CR.
 City COLORADO SPRINGS State CO Zip Code 80910-2637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350110
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JACKSON, WELLS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 534 LAKEWOOD CR.
 City COLORADO SPRINGS State CO Zip Code 80910-2637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376184
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JACKSON, WELLS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 534 LAKEWOOD CR.
 City COLORADO SPRINGS State CO Zip Code 80910-2637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410112
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2373 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOB III, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5135 HARRIS WOODS TRACE

City FULSHEAR	State TX	Zip Code 77441-4356
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.349966

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. JACOB III, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5135 HARRIS WOODS TRACE

City FULSHEAR	State TX	Zip Code 77441-4356
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.349971

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JACOBS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 CHAMISE WAY

City REDDING	State CA	Zip Code 96002-2146
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHASTA COMMUNITY HEALTH CENTER	Occupation (for Individual) NURSE
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016

Transaction ID : SA11A.408588

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2374 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBSEN, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1675 ELEANOR AVENUE

City SAINT PAUL	State MN	Zip Code 55116-1408
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXEC	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381225

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. JACOBSON, HILDING, L., MAJ. GEN., USAF
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DRIVE

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372310

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JACOBSON, HILDING, L., MAJ. GEN., USAF
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DRIVE

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372312

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2375 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBSON, HILDING, L., MAJ. GEN., USAF
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 480 OAKHILL DRIVE
 City LOMPOC State CA Zip Code 93436-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372314
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JACOBSON, HILDING, L., MAJ. GEN., USAF
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 480 OAKHILL DRIVE
 City LOMPOC State CA Zip Code 93436-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385109
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JACOBSON, HILDING, L., MAJ. GEN., USAF
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 480 OAKHILL DRIVE
 City LOMPOC State CA Zip Code 93436-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386062
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2376 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBSON, HILDING, L., MAJ. GEN., USAF
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DRIVE

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386063

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. JACOBSON, HILDING, L., MAJ. GEN., USAF
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DRIVE

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386066

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JACOBSON, HILDING, L., MAJ. GEN., USAF
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 OAKHILL DRIVE

City LOMPOC	State CA	Zip Code 93436-1111
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386167

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2377 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBS, MORRIS, JAKE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 POINCIANA PL
 City LAHAINA State HI Zip Code 96761-8320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368691
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JACOBS, MORRIS, JAKE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 POINCIANA PL
 City LAHAINA State HI Zip Code 96761-8320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390972
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JACOBS, MORRIS, JAKE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 POINCIANA PL
 City LAHAINA State HI Zip Code 96761-8320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399335
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2378 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JACOBS, MORRIS, JAKE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 POINCIANA PL

City LAHAINA	State HI	Zip Code 96761-8320
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PROPERTY MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406048

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. JACOBY, THEODORE, C., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12457 LIMESTONE SPUR

City SAINT LOUIS	State MO	Zip Code 63127-1625
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) T C JACOBY & CO	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.356844

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. JAEGER, LOWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 POTTERSTOWN ROAD

City LEBANON	State NJ	Zip Code 08833-5050
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JAEGER LUMBER	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.373473

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2379 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAEGER, LOWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 POTTERSTOWN ROAD
 City LEBANON State NJ Zip Code 08833-5050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAEGER LUMBER Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383533
 Amount of Each Receipt this Period 300.00
 Memo Item
CONTRIBUTION

B. JAEGGI, HELEN, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 N 190TH STREET APT A412
 City SHORELINE State WA Zip Code 98133-3847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365354
 Amount of Each Receipt this Period 300.00
 Memo Item
CONTRIBUTION

C. JAGANNATHAN, LAKSHMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4213 W BART DR
 City CHANDLER State AZ Zip Code 85226-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL CORPORATION Occupation (for Individual) PRINCIPAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399769
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2380 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAHNS, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 WOODCREST DR
 City M State NJ Zip Code 07960-4541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353674
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JAHNS, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 WOODCREST DR
 City M State NJ Zip Code 07960-4541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378873
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. JAHNS, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 WOODCREST DR
 City M State NJ Zip Code 07960-4541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397740
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2381 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAHNS, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 WOODCREST DR
 City M State NJ Zip Code 07960-4541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412722
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. JAIRAMANI, GAGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4902 EAST88TH PLACE
 City TULSA State OK Zip Code 74137-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCE RESEARCH CHEMICAL INC Occupation (for Individual) PURCHASING MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357479
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

C. JAIRAMANI, GAGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4902 EAST88TH PLACE
 City TULSA State OK Zip Code 74137-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCE RESEARCH CHEMICAL INC Occupation (for Individual) PURCHASING MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.385196
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2382 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAMES, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5209 MAYWOD CT
 City WINDSOR State CO Zip Code 80550-5960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OAK VALLEY HOMES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386539
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JAMES, THOMAS, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 BRUCE DRIVE
 City JASPER State GA Zip Code 30143-4254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358663
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. JAMES, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7747 INDIAN SPRINGS DR
 City NASHVILLE State TN Zip Code 37221-1128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380683
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2383 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAMESON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E CALLE VAQUEROS
 City TUCSON State AZ Zip Code 85749-8483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417870
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JAMESON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E CALLE VAQUEROS
 City TUCSON State AZ Zip Code 85749-8483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417881
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JAMESON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E CALLE VAQUEROS
 City TUCSON State AZ Zip Code 85749-8483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417899
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2384 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAMESON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E CALLE VAQUEROS
 City TUCSON State AZ Zip Code 85749-8483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417921
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JAMESON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E CALLE VAQUEROS
 City TUCSON State AZ Zip Code 85749-8483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417924
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JAMISON, RICHARD, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 ARTILLERY ROAD
 City WINCHESTER State VA Zip Code 22602-6945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362416
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2385 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAMISON, RICHARD, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 ARTILLERY ROAD
 City WINCHESTER State VA Zip Code 22602-6945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388732
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JANAY, GAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4621 SOUTH OCEAN BLVD.
 City HIGHLAND BEACH State FL Zip Code 33487-5300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374541
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. JANAY, GAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4621 SOUTH OCEAN BLVD.
 City HIGHLAND BEACH State FL Zip Code 33487-5300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382101
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2386 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JANAY, GAD, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 4621 SOUTH OCEAN BLVD.		Transaction ID : SA11A.416171
City HIGHLAND BEACH	State FL	Zip Code 33487-5300
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JANDERNOA, MICHAEL, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 171 MONROE AVE NW STE 410		Transaction ID : SA11A.421211
City GRAND RAPIDS	State MI	Zip Code 49503-2634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50000.00
Name of Employer (for Individual) NORTH PARTNERS	Occupation (for Individual) EXECUTIVE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JANECZEK, THEODORE, , ,		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 350 CEDAR RD		Transaction ID : SA11A.358390
City HERSHEY	State PA	Zip Code 17033-9302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) GM LEADER FAMILY CORP	Occupation (for Individual) CFO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	50350.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2387 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JANECEK, THEODORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 350 CEDAR RD

City HERSHEY	State PA	Zip Code 17033-9302
-----------------	-------------	------------------------

Date of Receipt: / /
Transaction ID : SA11A.382425

Amount of Each Receipt this Period:

Memo Item CONTRIBUTION

FEC ID number of contributing federal political committee:

Name of Employer (for Individual): GM LEADER FAMILY CORP
Occupation (for Individual): CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼:

B. JANECEK, THEODORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 350 CEDAR RD

City HERSHEY	State PA	Zip Code 17033-9302
-----------------	-------------	------------------------

Date of Receipt: / /
Transaction ID : SA11A.416075

Amount of Each Receipt this Period:

Memo Item CONTRIBUTION

FEC ID number of contributing federal political committee:

Name of Employer (for Individual): GM LEADER FAMILY CORP
Occupation (for Individual): CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼:

C. JANES, ARTHUR, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. BOX 2506

City GRAPEVINE	State TX	Zip Code 76099-2506
-------------------	-------------	------------------------

Date of Receipt: / /
Transaction ID : SA11A.402426

Amount of Each Receipt this Period:

Memo Item CONTRIBUTION

FEC ID number of contributing federal political committee:

Name of Employer (for Individual): PDS TECH
Occupation (for Individual): CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼:

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1200.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2388 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JANES, ARTHUR, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2506
 City GRAPEVINE State TX Zip Code 76099-2506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PDS TECH Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402434
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. JARA, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LILAC LN
 City JACKSON State TN Zip Code 38301-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISA WAGGENER Occupation (for Individual) OCCUPATIONAL THERAPY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353234
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. JARA, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LILAC LN
 City JACKSON State TN Zip Code 38301-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISA WAGGENER Occupation (for Individual) OCCUPATIONAL THERAPY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375710
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2389 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JARA, LISA, , ,			Date of Receipt MM / DD / YYYY 08 / 30 / 2016 Transaction ID : SA11A.387397
Mailing Address 23 LILAC LN			Amount of Each Receipt this Period 50.00
City JACKSON	State TN	Zip Code 38301-3909	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) LISA WAGGENER		Occupation (for Individual) OCCUPATIONAL THERAPY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JARA, LISA, , ,			Date of Receipt MM / DD / YYYY 08 / 30 / 2016 Transaction ID : SA11A.387398
Mailing Address 23 LILAC LN			Amount of Each Receipt this Period 50.00
City JACKSON	State TN	Zip Code 38301-3909	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) LISA WAGGENER		Occupation (for Individual) OCCUPATIONAL THERAPY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JARA, LISA, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.404218
Mailing Address 23 LILAC LN			Amount of Each Receipt this Period 25.00
City JACKSON	State TN	Zip Code 38301-3909	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) LISA WAGGENER		Occupation (for Individual) OCCUPATIONAL THERAPY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 475.00		

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2390 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JARA, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LILAC LN
 City JACKSON State TN Zip Code 38301-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISA WAGGENER Occupation (for Individual) OCCUPATIONAL THERAPY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407432
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JARA, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 LILAC LN
 City JACKSON State TN Zip Code 38301-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISA WAGGENER Occupation (for Individual) OCCUPATIONAL THERAPY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409276
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JARABICA, RAI LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 626
 City MANDEVILLE State LA Zip Code 70470-0626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410486
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2391 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JARABICA, RAI LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 626
 City MANDEVILLE State LA Zip Code 70470-0626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416976
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JARABICA, RAI LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 626
 City MANDEVILLE State LA Zip Code 70470-0626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416977
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JARABICA, RAI LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 626
 City MANDEVILLE State LA Zip Code 70470-0626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416980
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2392 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JARVIS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4767 MARTHA LANE

City FORT WORTH	State TX	Zip Code 76103-2033
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SAME AS ABOVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.352710

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. JARVIS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4767 MARTHA LANE

City FORT WORTH	State TX	Zip Code 76103-2033
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SAME AS ABOVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.365005

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JARVIS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4767 MARTHA LANE

City FORT WORTH	State TX	Zip Code 76103-2033
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SAME AS ABOVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
277.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2016

Transaction ID : SA11A.376121

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2393 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JARVIS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4767 MARTHA LANE

City FORT WORTH	State TX	Zip Code 76103-2033
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SAME AS ABOVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2016

Transaction ID : SA11A.393671

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JARVIS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4767 MARTHA LANE

City FORT WORTH	State TX	Zip Code 76103-2033
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SAME AS ABOVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400898

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JAVITT, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1025 FIFTH AVENUE
8AN

City NEW YORK	State NY	Zip Code 10028-0134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413571

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2394 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAVITT, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 FIFTH AVENUE
 8AN
 City NEW YORK State NY Zip Code 10028-0134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413572
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JAY, JEFFREY, R., , M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 FOX RUN LN
 City GREENWICH State CT Zip Code 06831-3737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT POINT PARTNERS Occupation (for Individual) VENTURE CAPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 41000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400507
 Amount of Each Receipt this Period 41000.00
 Memo Item CONTRIBUTION

C. JELLERSON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 PARK CIRCLE
 City TEMPLE State GA Zip Code 30179-3741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411951
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	41350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2395 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2907 LANCASTER DR

City BLACKSBURG	State VA	Zip Code 24060-8150
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350507

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. JENKINS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2907 LANCASTER DR

City BLACKSBURG	State VA	Zip Code 24060-8150
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.356582

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JENKINS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1225 WHITESIDE MOUNTAIN RD.

City HIGHLANDS	State NC	Zip Code 28741-7367
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406177

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2396 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENKINS, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8175 ARVILLE STREET #14
 City LAS VEGAS State NV Zip Code 89139-7111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASTER LAESE PLAN Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393873
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JENKINS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5533 VIA ALVITO DR
 City WESTERVILLE State OH Zip Code 43082-2503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE COLUMBUS DISTRIBUTING COMPANY Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388341
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. JENKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5225 FRINGETREE DRIVE
 City MCKINNEY State TX Zip Code 75071-8366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383617
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2397 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5225 FRINGETREE DRIVE
 City MCKINNEY State TX Zip Code 75071-8366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.398415
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JENKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5225 FRINGETREE DRIVE
 City MCKINNEY State TX Zip Code 75071-8366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408064
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JENNINGS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5500 FELTL ROAD
 City HOPKINS State MN Zip Code 55343-7920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BESTMARK Occupation (for Individual) MARKET RESEARCH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372343
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2398 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 55487
 City HOUSTON State TX Zip Code 77255-5487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.347041
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JENNINGS, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 55487
 City HOUSTON State TX Zip Code 77255-5487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349205
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JENNINGS, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 55487
 City HOUSTON State TX Zip Code 77255-5487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397990
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2399 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5207 W HILDEBRAND BOULEVARD
 APT 301
 City KENNEWICK State WA Zip Code 99338-5206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364419
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. JENNINGS, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5207 W HILDEBRAND BOULEVARD
 APT 301
 City KENNEWICK State WA Zip Code 99338-5206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 02 / 2016**
Transaction ID : SA11A.389017
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JENNISON, JOYCE, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6052 FOXFIELD LANE
 City YORBA LINDA State CA Zip Code 92886-5823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIRT CHEAP INC Occupation (for Individual) HUMAN RESOURCES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.376534
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2400 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENNINGS, MARTHA, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 5923

City KETCHUM	State ID	Zip Code 83340-5923
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) HOMEMAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2016
Transaction ID : SA11A.345186

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. JENSEN, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 131 MILL ROAD

City SADDLE RIVER	State NJ	Zip Code 07458-3305
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JENSEN RESEARCH		Occupation (for Individual) COMPUTER PROGRAMMER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2016
Transaction ID : SA11A.346826

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. JENSEN, GERALDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1141 SW HENSLEY RD

City TROUTDALE	State OR	Zip Code 97060-1473
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2016
Transaction ID : SA11A.400058

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2401 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENSEN, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1141 SW HENSLEY RD
 City TROUTDALE State OR Zip Code 97060-1473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400059
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JENSEN, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1141 SW HENSLEY RD
 City TROUTDALE State OR Zip Code 97060-1473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420365
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JENSEN, HOLLY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 FARWELL DR
 City MADISON State WI Zip Code 53704-6029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 30400.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391344
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 25050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2402 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JENSEN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17931 NW GILBERT LN

City PORTLAND	State OR	Zip Code 97229-8538
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2016

Transaction ID : SA11A.366829

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. JENSEN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17931 NW GILBERT LN

City PORTLAND	State OR	Zip Code 97229-8538
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370606

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JENSEN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17931 NW GILBERT LN

City PORTLAND	State OR	Zip Code 97229-8538
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
407.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398571

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2403 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JESSE, BOB, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 WHITTINGHAM LANE
 City FORT WAYNE State IN Zip Code 46814-9377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395957
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. JESSEN, L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 CAMAN PARK DR
 City LUCAS State TX Zip Code 75002-8787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D R HORTON INC. Occupation (for Individual) VP OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346524
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JESSEN, L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 CAMAN PARK DR
 City LUCAS State TX Zip Code 75002-8787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D R HORTON INC. Occupation (for Individual) VP OF OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365116
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2404 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JESSEN, L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1505 CAMAN PARK DR

City LUCAS	State TX	Zip Code 75002-8787
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D R HORTON INC.	Occupation (for Individual) VP OF OPERATIONS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2016

Transaction ID : SA11A.393679

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. JEZEK, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3802 CREEKVIEW TRAIL

City TEMPLE	State TX	Zip Code 76504-2107
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : SA11A.386726

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. JOBE, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21115 BANLYNN CT

City TOPANGA	State CA	Zip Code 90290-4486
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOBE CORPORATION	Occupation (for Individual) CONSTRUCTION MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2016

Transaction ID : SA11A.357185

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2405 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, ABEN, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4360 DOUBLES ALLEY DRIVE
UNIT 104

City VERO BEACH State FL Zip Code 32967-2072

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.389835

Amount of Each Receipt this Period
2700.00

Memo Item CONTRIBUTION

B. JOHNS, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1254 FOUNTAINE DRIVE

City COLUMBUS State OH Zip Code 43221-1520

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364328

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

C. JOHNSON, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 CANDLEWOOD DR

City HOUSTON State TX Zip Code 77042-1522

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2016

Transaction ID : SA11A.346868

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2406 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 CANDLEWOOD DR
 City HOUSTON State TX Zip Code 77042-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 12 / 2016
Transaction ID : SA11A.365746
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 CANDLEWOOD DR
 City HOUSTON State TX Zip Code 77042-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 12 / 2016
Transaction ID : SA11A.393626
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, BILLIE, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2774 MOORE RD
 City BEAUMONT State TX Zip Code 77713-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373017
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2407 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, BILLIE, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2774 MOORE RD
 City BEAUMONT State TX Zip Code 77713-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373020
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. JOHNSON, BILLIE, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2774 MOORE RD
 City BEAUMONT State TX Zip Code 77713-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373021
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, BILLIE, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2774 MOORE RD
 City BEAUMONT State TX Zip Code 77713-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373022
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2408 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, BILLIE, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2774 MOORE RD
 City BEAUMONT State TX Zip Code 77713-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398583
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSON, BILLIE, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2774 MOORE RD
 City BEAUMONT State TX Zip Code 77713-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414335
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3304 EAST BURNSVILLE PARKWAY
 City BURNSVILLE State MN Zip Code 55337-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTERLINE FREIGHT SERVICES, INC. Occupation (for Individual) TRANSPORTATION BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385169
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 325.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2409 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, BROOK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2685 ALTRURIA RD
 City BARTLETT State TN Zip Code 38134-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREEN MOUNTAIN TECHNOLOGY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.416757
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JOHNSON, BRUCE, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 N PULASKI ROAD
 City CHICAGO State IL Zip Code 60639-3737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHICAGO DRYER COMPANY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383386
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. JOHNSON, JR., C., LLOYD, MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 917 CARDINAL RD.
 City VIRGINIA BEACH State VA Zip Code 23451-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 05 / 2016**
Transaction ID : SA11A.345191
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2410 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, JR., C., LLOYD, MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 917 CARDINAL RD.

City VIRGINIA BEACH	State VA	Zip Code 23451-4910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.360170

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

B. JOHNSON, JR., C., LLOYD, MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 917 CARDINAL RD.

City VIRGINIA BEACH	State VA	Zip Code 23451-4910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387793

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. JOHNSON, JR., C., LLOYD, MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 917 CARDINAL RD.

City VIRGINIA BEACH	State VA	Zip Code 23451-4910
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408859

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2411 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, D SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15125 CONWAY ROAD
 City CHESTERFIELD State MO Zip Code 63017-2047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.364341
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, DAIVD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 35
 City VICTORIA State TX Zip Code 77902-0035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON & LINDLEY Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 09 / 26 / 2016
Transaction ID : SA11A.406702
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. JOHNSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 EMILY LANE
 City BEAVER DAM State WI Zip Code 53916-1991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 07 / 26 / 2016
Transaction ID : SA11A.355728
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2412 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18067 BLUE SAIL DR
 City PACIFIC PALISADES State CA Zip Code 90272-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362350
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18067 BLUE SAIL DR
 City PACIFIC PALISADES State CA Zip Code 90272-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369966
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 EMILY LANE
 City BEAVER DAM State WI Zip Code 53916-1991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380700
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2413 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18067 BLUE SAIL DR
 City PACIFIC PALISADES State CA Zip Code 90272-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382372
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HARWELL DR
 City COLUMBIA State SC Zip Code 29223-8106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398496
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. JOHNSEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 EMILY LANE
 City BEAVER DAM State WI Zip Code 53916-1991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408033
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2414 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, DAVID, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 27
 City RIDDLE State OR Zip Code 97469-0027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C&D LUMBER Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.367895
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, DAVID, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 35
 City VICTORIA State TX Zip Code 77902-0035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406694
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, DENNIS, R., , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5908 SHADYVIEW PL
 City MIDLAND State TX Zip Code 79707-1482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUMMIT PETROLEUM Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.356846
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2415 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JOHNSTON, G., LENARD, ,		Date of Receipt MM / DD / YYYY 07 / 31 / 2016
Mailing Address 2522 CROFTON CT		Transaction ID : SA11A.358866
City BLOOMFIELD HILLS	State MI	Zip Code 48304-1809
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JOHNSON, GARY, , ,		Date of Receipt MM / DD / YYYY 09 / 23 / 2016
Mailing Address 3238 ELLA LEE LANE		Transaction ID : SA11A.404859
City HOUSTON	State TX	Zip Code 77019-5924
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JOHNSON, GEORGE, M., ,		Date of Receipt MM / DD / YYYY 07 / 13 / 2016
Mailing Address 16 CHAPEL HILL ESTATES		Transaction ID : SA11A.347009
City ST LOUIS	State MO	Zip Code 63131-1315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2416 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, GEORGE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 CHAPEL HILL ESTATES
 City ST LOUIS State MO Zip Code 63131-1315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371034
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. JOHNSON, GRANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 N ACANTILADO DR
 City SAINT GEORGE State UT Zip Code 84790-8380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355492
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOHNSON, GRANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 N ACANTILADO DR
 City SAINT GEORGE State UT Zip Code 84790-8380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364804
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2417 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, GRANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 N ACANTILADO DR
 City SAINT GEORGE State UT Zip Code 84790-8380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370290
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, GRANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 N ACANTILADO DR
 City SAINT GEORGE State UT Zip Code 84790-8380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2016
Transaction ID : SA11A.393683
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, GRANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 N ACANTILADO DR
 City SAINT GEORGE State UT Zip Code 84790-8380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422923
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2418 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 292
 City CHATHAM State NY Zip Code 12037-0292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401370
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 STILLFOREST STREET
 City HOUSTON State TX Zip Code 77024-7518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.374061
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10813 E WINDGATE PASS DRIVE
 City SCOTTSDALE State AZ Zip Code 85255-7144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.360916
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2419 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 N OCEAN DR.
 4F
 City FORT LAUDERDALE State FL Zip Code 33308-5904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359714
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 N OCEAN DR.
 4F
 City FORT LAUDERDALE State FL Zip Code 33308-5904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372834
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 EAGLE CREEK CANYON
 City RUIDOSO State NM Zip Code 88345-5549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388290
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2420 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNS , JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 93 EAGLE CREEK CANYON

City RUIDOSO	State NM	Zip Code 88345-5549
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.388291

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. JOHNS, JOHN, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2749 SOUTHWOOD RD

City BIRMINGHAM	State AL	Zip Code 35223-1228
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROTECTIVE LIFE	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.385240

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

C. JOHNSON, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1015 RIMROCK LANE

City SAN LUIS OBISPO	State CA	Zip Code 93401-8942
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.419808

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2421 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 NORTH 700 EAST
 6
 City OREM State UT Zip Code 84097-4269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350548
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. JOHNSON, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12514 W DOWNING PLACE
 City BRIMFIELD State IL Zip Code 61517-9689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSF HEALTH CARE Occupation (for Individual) M.D.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361508
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. JOHNSON, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 NORTH 700 EAST
 6
 City OREM State UT Zip Code 84097-4269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376096
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2422 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 NORTH 700 EAST
 6
 City OREM State UT Zip Code 84097-4269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383955
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. JOHNSON, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 834 NORTH 700 EAST
 6
 City OREM State UT Zip Code 84097-4269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400843
 Amount of Each Receipt this Period
 75.00
 Memo Item CONTRIBUTION

C. JOHNSON, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 STOPPER DR.
 City MONTOURSVILLE State PA Zip Code 17754-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404726
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2423 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 STOPPER DR.
 City MONTOURSVILLE State PA Zip Code 17754-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404731
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSON, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 STOPPER DR.
 City MONTOURSVILLE State PA Zip Code 17754-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404737
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 STOPPER DR.
 City MONTOURSVILLE State PA Zip Code 17754-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420085
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2424 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, KENNETH, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2165 STOPPER DR.

City MONTOURSVILLE	State PA	Zip Code 17754-9697
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.00

Date of Receipt
09 / 29 / 2016
Transaction ID : SA11A.420086

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JOHNSON, KENNETH, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2165 STOPPER DR.

City MONTOURSVILLE	State PA	Zip Code 17754-9697
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
377.00

Date of Receipt
09 / 29 / 2016
Transaction ID : SA11A.420098

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JOHNSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 910 MOONGLO ROAD SPC 29

City BUHL	State ID	Zip Code 83316-6181
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 12 / 2016
Transaction ID : SA11A.346968

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2425 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, LENETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 AMES LANE
 City PORT LUDLOW State WA Zip Code 98365-9626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350221
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, LENETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 AMES LANE
 City PORT LUDLOW State WA Zip Code 98365-9626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382346
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, LENETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 AMES LANE
 City PORT LUDLOW State WA Zip Code 98365-9626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412263
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2426 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, LESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1021 DOWNSHIRE CHASE
 City VIRGINIA BEACH State VA Zip Code 23452-6154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CENTER RADIOLOGISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420115
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388534
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392007
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	555.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2427 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402688
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402692
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416957
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2428 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417693
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419989
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 EMERALD DR
 City CUMMING State GA Zip Code 30040-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADP Occupation (for Individual) DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419990
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2429 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNS, NANCY, DUNLAP, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2749 SOUTHWOOD RD
 City BIRMINGHAM State AL Zip Code 35223-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ALABAMA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385241
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. JOHNSON, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2311 S MAIN AVENUE
 City SIOUX FALLS State SD Zip Code 57105-3831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392781
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. JOHNSON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5609 S 75TH E PLACE
 City TULSA State OK Zip Code 74145-7736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359288
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2430 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5609 S 75TH E PLACE
 City TULSA State OK Zip Code 74145-7736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2016
Transaction ID : SA11A.389138
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5609 S 75TH E PLACE
 City TULSA State OK Zip Code 74145-7736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418059
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4031 MISCHIRE DR
 City HOUSTON State TX Zip Code 77025-4023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410884
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2431 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 OVERLAKE DR. E
 City MEDINA State WA Zip Code 98039-5329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICROSOFT Occupation (for Individual) BUSINESS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373408
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILIP JOHNSON Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348472
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILIP JOHNSON Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353771
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2432 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILIP JOHNSON Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2016
Transaction ID : SA11A.363357
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILIP JOHNSON Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375761
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILIP JOHNSON Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397769
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2433 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 LORELANE PLACE
 City KEY LARGO State FL Zip Code 33037-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILIP JOHNSON Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404247
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 1710
 City CULLMAN State AL Zip Code 35056-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALABAMA COAL COOPERATIVE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404314
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. JOHNSON, RICHARD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4387 GRATTAN PRICE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383325
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2434 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 555
 City WAUPACA State WI Zip Code 54981-0555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN FITNESS CENTERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 573.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358301
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSON, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 555
 City WAUPACA State WI Zip Code 54981-0555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN FITNESS CENTERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 573.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382450
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 555
 City WAUPACA State WI Zip Code 54981-0555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN FITNESS CENTERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 573.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416140
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2435 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1810 AVENIDA DEL MUNDO #503
 City CORONADO State CA Zip Code 92118-3003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.366956
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSON, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1810 AVENIDA DEL MUNDO #503
 City CORONADO State CA Zip Code 92118-3003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.366957
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOHNSON, SHONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21124 CARDINAL POND TERRACE APT. # 214
 City ASHBURN State VA Zip Code 20147-6110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2436 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, SHONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21124 CARDINAL POND TERRACE
 APT. # 214
 City ASHBURN State VA Zip Code 20147-6110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366697
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JOHNSON, SHONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21124 CARDINAL POND TERRACE
 APT. # 214
 City ASHBURN State VA Zip Code 20147-6110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385884
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JOHNSON, SHONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21124 CARDINAL POND TERRACE
 APT. # 214
 City ASHBURN State VA Zip Code 20147-6110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396799
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2437 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, SHONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21124 CARDINAL POND TERRACE
 APT. # 214
 City ASHBURN State VA Zip Code 20147-6110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397888
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JOHNSON, STAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1516 BAY OAKS DRIVE
 City ALBERT LEA State MN Zip Code 56007-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.346992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOHNSON, STAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1516 BAY OAKS DRIVE
 City ALBERT LEA State MN Zip Code 56007-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.362790
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2438 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, STAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1516 BAY OAKS DRIVE
 City ALBERT LEA State MN Zip Code 56007-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.374096
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350089
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368112
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2439 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374278
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386064
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. JOHNSON, SUSAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE Occupation (for Individual) VP
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398559
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2440 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, TODD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 RIDGE WOOD ROAD
 City DULUTH State MN Zip Code 55804-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPSTAN CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5997.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381903
 Amount of Each Receipt this Period 999.00
 Memo Item
CONTRIBUTION

B. JOHNSON, TODD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 RIDGE WOOD ROAD
 City DULUTH State MN Zip Code 55804-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPSTAN CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5997.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381904
 Amount of Each Receipt this Period 999.00
 Memo Item
CONTRIBUTION

C. JOHNSON, TODD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 RIDGE WOOD ROAD
 City DULUTH State MN Zip Code 55804-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPSTAN CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5997.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399036
 Amount of Each Receipt this Period 999.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2997.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2441 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, TODD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 RIDGE WOOD ROAD
 City DULUTH State MN Zip Code 55804-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPSTAN CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5997.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399809
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. JOHNSON, TODD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 RIDGE WOOD ROAD
 City DULUTH State MN Zip Code 55804-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPSTAN CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5997.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399810
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. JOHNSON, TODD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 RIDGE WOOD ROAD
 City DULUTH State MN Zip Code 55804-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPSTAN CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5997.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404111
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

2000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2442 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, TODD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 721 RIDGE WOOD ROAD

City DULUTH	State MN	Zip Code 55804-1732
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPSTAN CORPORATION	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5997.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.404112

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. JOHNSON, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 479 26TH AVE NE UNIT E

City HICKORY	State NC	Zip Code 28601-2586
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372607

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JOHNSON, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 479 26TH AVE NE UNIT E

City HICKORY	State NC	Zip Code 28601-2586
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391256

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2443 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 479 26TH AVE NE UNIT E
 City HICKORY State NC Zip Code 28601-2586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391258
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JOHNSON EVES, VALERIE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2118 PEREFRINE CT
 City WEST LINN State OR Zip Code 97068-2829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D. R JOHNSON Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367896
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. JOHNSTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 PATRIOT HILL DR
 City BASKING RIDGE State NJ Zip Code 07920-4214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKLEY INSURANCE CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390487
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2444 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358931
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362502
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366539
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2445 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370021
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382854
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392037
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2446 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401065
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404362
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404368
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2447 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404593
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420099
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422304
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2448 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 TANGLEWOOD TRAIL
 City ST. JOSEPH State MI Zip Code 49085-9618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422311
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384732
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390074
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2449 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSTON, WILLIAM, R., ,

Mailing Address **6249 MUSKET LANE**

City HIXSON	State TN	Zip Code 37343-4825
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES-SEMI IRETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
563.00

Date of Receipt
09 / 06 / 2016

Transaction ID : SA11A.390081

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSTON, WILLIAM, R., ,

Mailing Address **6249 MUSKET LANE**

City HIXSON	State TN	Zip Code 37343-4825
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES-SEMI IRETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
563.00

Date of Receipt
09 / 19 / 2016

Transaction ID : SA11A.399539

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSTON, WILLIAM, R., ,

Mailing Address **6249 MUSKET LANE**

City HIXSON	State TN	Zip Code 37343-4825
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES-SEMI IRETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
563.00

Date of Receipt
09 / 19 / 2016

Transaction ID : SA11A.399540

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2450 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402977
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402981
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402999
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2451 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSTON, WILLIAM, R., ,

Mailing Address **6249 MUSKET LANE**

City **HIXSON** State **TN** Zip Code **37343-4825**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **SALES-SEMI IRETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **563.00**

Date of Receipt
09 / 23 / 2016

Transaction ID : SA11A.409495

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSTON, WILLIAM, R., ,

Mailing Address **6249 MUSKET LANE**

City **HIXSON** State **TN** Zip Code **37343-4825**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **SALES-SEMI IRETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **563.00**

Date of Receipt
09 / 23 / 2016

Transaction ID : SA11A.409496

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSTON, WILLIAM, R., ,

Mailing Address **6249 MUSKET LANE**

City **HIXSON** State **TN** Zip Code **37343-4825**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **SALES-SEMI IRETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **563.00**

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.409944

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **55.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2452 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 563.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409945
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 563.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409947
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. JOHNSTON, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6249 MUSKET LANE
 City HIXSON State TN Zip Code 37343-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES-SEMI IRETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 563.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409967
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 61.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2453 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONAS, ARETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
205

City LOUISVILLE State KY Zip Code 40243-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2016

Transaction ID : SA11A.352391

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JONAS, ARETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
205

City LOUISVILLE State KY Zip Code 40243-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2016

Transaction ID : SA11A.375896

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JONAS, ARETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
205

City LOUISVILLE State KY Zip Code 40243-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2016

Transaction ID : SA11A.401495

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2454 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONAS, ARETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
205

City LOUISVILLE State KY Zip Code 40243-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.419686

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. JONAS, ARETA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 CHRISTIAN VILLAGE CIRCLE
205

City LOUISVILLE State KY Zip Code 40243-1352

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.419687

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. JONES, ALYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3421 NORTH POWERLINE ROAD

City POMPANO BEACH State FL Zip Code 33069-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A.M. JONES, CPA, PA Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.418450

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2455 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4236 BEVERLY DRIVE
 City DALLAS State TX Zip Code 75205-3021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376226
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. JONES, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 WILLOW GLEN COURT
 City BOULDER State CO Zip Code 80302-4709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TICONDEROGA CAPITAL Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348451
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. JONES, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 WILLOW GLEN COURT
 City BOULDER State CO Zip Code 80302-4709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TICONDEROGA CAPITAL Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372423
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2456 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 WILLOW GLEN COURT
 City BOULDER State CO Zip Code 80302-4709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TICONDEROGA CAPITAL Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380461
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JONES, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 WILLOW GLEN COURT
 City BOULDER State CO Zip Code 80302-4709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TICONDEROGA CAPITAL Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380464
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. JONES, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 WILLOW GLEN COURT
 City BOULDER State CO Zip Code 80302-4709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TICONDEROGA CAPITAL Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392100
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2457 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2981 GOLD CANAL DR.
 City SACRAMENTO State CA Zip Code 95670-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGY OPERATION MANAGEMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360238
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JONES, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2981 GOLD CANAL DR.
 City SACRAMENTO State CA Zip Code 95670-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGY OPERATION MANAGEMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384671
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JONES, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2981 GOLD CANAL DR.
 City SACRAMENTO State CA Zip Code 95670-6126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGY OPERATION MANAGEMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386890
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2458 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, DEREK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2981 GOLD CANAL DR.
City SACRAMENTO State CA Zip Code 95670-6126
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ENERGY OPERATION MANAGEMENT Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410588
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JONES, DEREK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2981 GOLD CANAL DR.
City SACRAMENTO State CA Zip Code 95670-6126
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ENERGY OPERATION MANAGEMENT Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419411
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JONES, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 751
City HOSCHTON State GA Zip Code 30548-0751
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 445.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357681
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2459 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, DORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 751
 City HOSCHTON State GA Zip Code 30548-0751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363860
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JONES, DORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 751
 City HOSCHTON State GA Zip Code 30548-0751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382787
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JONES, DORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 751
 City HOSCHTON State GA Zip Code 30548-0751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394027
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2460 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 751

City HOSCHTON	State GA	Zip Code 30548-0751
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412361

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. JONES, DORIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 751

City HOSCHTON	State GA	Zip Code 30548-0751
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413023

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JONES, DUDLEY, D., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 N CREEKWOOD DRIVE

City MANSFIELD	State TX	Zip Code 76063-5428
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358767

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2461 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, DUDLEY, D., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 N CREEKWOOD DRIVE
 City MANSFIELD State TX Zip Code 76063-5428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417175
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. JONES, EDWIN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12105 HILLTOP DRIVE
 City LOS ALTOS HILLS State CA Zip Code 94024-5216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406986
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. JONES, EUNICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 24TH AVENUE S
 City FARGO State ND Zip Code 58103-5718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389662
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2462 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PLACE N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345908
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PLACE N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346997
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PLACE N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349449
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2463 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, HOWARD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 NORTHFIELD PLACE N

City REYNOLDSBURG	State OH	Zip Code 43068-1810
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362433

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. JONES, HOWARD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 NORTHFIELD PLACE N

City REYNOLDSBURG	State OH	Zip Code 43068-1810
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382544

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. JONES, HOWARD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 NORTHFIELD PLACE N

City REYNOLDSBURG	State OH	Zip Code 43068-1810
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382545

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2464 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PLACE N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387911
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PLACE N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389145
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. JONES, HOWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NORTHFIELD PLACE N
 City REYNOLDSBURG State OH Zip Code 43068-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390783
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2465 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, HOWARD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1001 NORTHFIELD PLACE N

City REYNOLDSBURG	State OH	Zip Code 43068-1810
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **435.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.396586

Amount of Each Receipt this Period

30.00

 Memo Item CONTRIBUTION

B. JONES, HOWARD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1001 NORTHFIELD PLACE N

City REYNOLDSBURG	State OH	Zip Code 43068-1810
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **435.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422352

Amount of Each Receipt this Period

30.00

 Memo Item CONTRIBUTION

C. JONES NICOU, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3559 MT DIABLO BLVD

City LAFAYETTE	State CA	Zip Code 94549-8302
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369967

Amount of Each Receipt this Period

100.00

 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2466 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 KINGSTREE COURT
 City DUBLIN State OH Zip Code 43017-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352027
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JONES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 KINGSTREE COURT
 City DUBLIN State OH Zip Code 43017-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382008
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JONES, JENKIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6447 S LOUISVILLE AVENUE
 City TULSA State OK Zip Code 74136-1532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396184
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2467 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2105 LEE SHORE PLACE
 City WILMINGTON State NC Zip Code 28405-5273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389405
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. JONES, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14027 MEMORIAL DR. #266
 City HOUSTON State TX Zip Code 77079-6826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369011
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JONES, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14027 MEMORIAL DR. #266
 City HOUSTON State TX Zip Code 77079-6826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380207
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2468 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23710 COLLINFORD CT
 City KATY State TX Zip Code 77494-4509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350132
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JONES, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23710 COLLINFORD CT
 City KATY State TX Zip Code 77494-4509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391173
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. JONES, LUTHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 KAH DENA RD
 City MORRISTOWN State NJ Zip Code 07960-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SONNEBORN, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418540
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2469 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 N HOMER ST
 City LANSING State MI Zip Code 48912-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356659
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JONES, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 N HOMER ST
 City LANSING State MI Zip Code 48912-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398306
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. JONES, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 N HOMER ST
 City LANSING State MI Zip Code 48912-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403597
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2470 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 N HOMER ST
 City LANSING State MI Zip Code 48912-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403646
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. JONES, MIRIAM, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 WINSTON AVENUE
 City SAN MARINO State CA Zip Code 91108-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357854
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. JONES, NELSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 WINSTON AVENUE
 City SAN MARINO State CA Zip Code 91108-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357861
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2471 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, PAUL, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12001 TURTLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-2938
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392452

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. JONES, PAUL, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12001 TURTLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-2938
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417377

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. JONES, R. LEE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4251 CUSTIS AVENUE

City SACRAMENTO	State CA	Zip Code 95822-1425
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAA	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358695

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2472 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, RICHARF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12916 BAY PLANTATION DR
 City JACKSONVILLE State FL Zip Code 32223-0784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEGASYSTEMS INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394508
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. JONES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 S REISNER ST
 City INDIANAPOLIS State IN Zip Code 46221-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350560
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JONES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 S REISNER ST
 City INDIANAPOLIS State IN Zip Code 46221-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.363809
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2473 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 S REISNER ST
 City INDIANAPOLIS State IN Zip Code 46221-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382559
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JONES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 S REISNER ST
 City INDIANAPOLIS State IN Zip Code 46221-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390055
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JONES, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 S REISNER ST
 City INDIANAPOLIS State IN Zip Code 46221-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408517
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2474 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1317 S REISNER ST

City INDIANAPOLIS	State IN	Zip Code 46221-1634
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413051

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JONES, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1317 S REISNER ST

City INDIANAPOLIS	State IN	Zip Code 46221-1634
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414896

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JONES, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2776 HENN HYDE ROAD

City WARREN	State OH	Zip Code 44484-1238
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHEAST OHIO ORTHOPEDICS	Occupation (for Individual) SURGEON
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403698

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2475 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JONES, THOMAS, C., ,

Mailing Address **4831 SW PARKGATE BLVD**

City **PALM CITY** State **FL** Zip Code **34990-4416**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt
07 / 21 / 2016

Transaction ID : SA11A.352109

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JONES, THOMAS, C., ,

Mailing Address **4831 SW PARKGATE BLVD**

City **PALM CITY** State **FL** Zip Code **34990-4416**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt
07 / 26 / 2016

Transaction ID : SA11A.355417

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JONES, THOMAS, C., ,

Mailing Address **4831 SW PARKGATE BLVD**

City **PALM CITY** State **FL** Zip Code **34990-4416**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt
08 / 21 / 2016

Transaction ID : SA11A.375835

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **1000.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2476 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, THOMAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 SW PARKGATE BLVD
 City PALM CITY State FL Zip Code 34990-4416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401443
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JORDAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 S GUILFORD ROAD 3109
 City CARMEL State IN Zip Code 46032-2999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391680
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JORDAN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 S GUILFORD ROAD 3109
 City CARMEL State IN Zip Code 46032-2999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412443
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2477 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344355
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355227
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364848
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2478 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368314
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368317
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390054
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2479 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393729
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. JORDAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BANCROFT DRIVE
 City NEW ORLEANS State LA Zip Code 70122-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404783
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. JORDAN, MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ENCINO PLACE
 City ALBUQUERQUE State NM Zip Code 87102-2601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF NEW MEXICO Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387973
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2480 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDAN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4277 LAS VIRGENES ROAD
 5
 City CALABASAS State CA Zip Code 91302-1973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOS ANGELES COUNTY Occupation (for Individual) LAW ENFORCEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2016
Transaction ID : SA11A.349065
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

B. JORDAN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4277 LAS VIRGENES ROAD
 5
 City CALABASAS State CA Zip Code 91302-1973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOS ANGELES COUNTY Occupation (for Individual) LAW ENFORCEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.369069
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. JORDAN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4277 LAS VIRGENES ROAD
 5
 City CALABASAS State CA Zip Code 91302-1973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOS ANGELES COUNTY Occupation (for Individual) LAW ENFORCEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398664
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	393.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2481 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDAN, THOMAS, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8237 WINDSONG COURT

City COLUMBUS	State OH	Zip Code 43235-1491
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.383368

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. JORDEN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1793 SOUTH MAIN STREET

City MANSFIELD	State OH	Zip Code 44907-2826
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PSYCHOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.410679

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. JORGENSEN, ROBERT, R., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6501 BOWIE DR.

City SPRINGFIELD	State VA	Zip Code 22150-1306
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2016

Transaction ID : SA11A.346545

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2482 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORGENSEN, ROBERT, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 BOWIE DR.
 City SPRINGFIELD State VA Zip Code 22150-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349120
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. JORGENSEN, ROBERT, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 BOWIE DR.
 City SPRINGFIELD State VA Zip Code 22150-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363111
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. JORGENSEN, ROBERT, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 BOWIE DR.
 City SPRINGFIELD State VA Zip Code 22150-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365120
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2483 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORGENSEN, ROBERT, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 BOWIE DR.
 City SPRINGFIELD State VA Zip Code 22150-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2016
Transaction ID : SA11A.389152
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. JORGENSEN, ROBERT, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 BOWIE DR.
 City SPRINGFIELD State VA Zip Code 22150-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2016
Transaction ID : SA11A.393731
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. JOSE, ELISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10617 SPRING BUCK TR.
 City ORLANDO State FL Zip Code 32825-8522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390129
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2484 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOSE, ELISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10617 SPRING BUCK TR.

City ORLANDO	State FL	Zip Code 32825-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390130

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. JOSE, ELISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10617 SPRING BUCK TR.

City ORLANDO	State FL	Zip Code 32825-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403802

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. JOSE, ELISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10617 SPRING BUCK TR.

City ORLANDO	State FL	Zip Code 32825-8522
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403806

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2485 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOSEPH, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 228 6TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-5736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PALM REALTY BOUTIQUE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382137
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. JOSEPH, ROGER, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 E INDIA ROW APT 35F
 City BOSTON State MA Zip Code 02110-3323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BINGHAM MCCUTCHEN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378483
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. JOYCE, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1303 NOBLE HERON WAY
 City NAPLES State FL Zip Code 34105-2791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362856
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2486 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYCE, NOEL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24763 LAKE ROAD
 City BAY VILLAGE State OH Zip Code 44140-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368919
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JOYCE, NOEL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24763 LAKE ROAD
 City BAY VILLAGE State OH Zip Code 44140-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388146
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JOYCE, NOEL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24763 LAKE ROAD
 City BAY VILLAGE State OH Zip Code 44140-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397623
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2487 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYCE, NOEL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24763 LAKE ROAD
 City BAY VILLAGE State OH Zip Code 44140-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397653
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JOYCE, NOEL, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24763 LAKE ROAD
 City BAY VILLAGE State OH Zip Code 44140-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414347
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. JOYCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 SCHOOL PO BOX 330
 City WELLSVILLE State NY Zip Code 14895-0330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTIS EASTERN SERVICE LLC Occupation (for Individual) OTIS EASTER SERVICE LLC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385145
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2488 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYCE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 SCHOOL PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTIS EASTERN SERVICE LLC	Occupation (for Individual) OTIS EASTER SERVICE LLC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386764

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. JOYCE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 SCHOOL PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTIS EASTERN SERVICE LLC	Occupation (for Individual) OTIS EASTER SERVICE LLC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386765

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. JOYCE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 SCHOOL PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTIS EASTERN SERVICE LLC	Occupation (for Individual) OTIS EASTER SERVICE LLC
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2016

Transaction ID : SA11A.398116

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2489 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JOYCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 SCHOOL PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTIS EASTERN SERVICE LLC	Occupation (for Individual) OTIS EASTER SERVICE LLC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407466

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. JOYCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 SCHOOL PO BOX 330

City WELLSVILLE	State NY	Zip Code 14895-0330
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OTIS EASTERN SERVICE LLC	Occupation (for Individual) OTIS EASTER SERVICE LLC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407467

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. JOYNER, JOHNATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7950 MONTEREY BAY DR

City JAX	State FL	Zip Code 32256-2933
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN JOYNER	Occupation (for Individual) CFO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405232

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2490 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUBITZ, GAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 11306

City PORTLAND	State OR	Zip Code 97211-0306
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016
Transaction ID : SA11A.354440

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. JUDSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3 TURTLE GROVE LANE

City VILLAGE OF GOLF	State FL	Zip Code 33436-5626
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC FUNDING, LLC	Occupation (for Individual) SCHOOL OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016
Transaction ID : SA11A.372174

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. JUDSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3 TURTLE GROVE LANE

City VILLAGE OF GOLF	State FL	Zip Code 33436-5626
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC FUNDING, LLC	Occupation (for Individual) SCHOOL OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016
Transaction ID : SA11A.416533

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2491 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUILLARD, DONALD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 06747 COUNTY ROAD 19

City STRYKER	State OH	Zip Code 43557-9760
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.381315

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. JUNDA, LESLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 G STREET

City SOUTH BOSTON	State MA	Zip Code 02127-2921
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2016

Transaction ID : SA11A.359224

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. JUNDA, LESLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 G STREET

City SOUTH BOSTON	State MA	Zip Code 02127-2921
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2016

Transaction ID : SA11A.372255

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2492 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUNDA, LESLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 G STREET
City SOUTH BOSTON State MA Zip Code 02127-2921
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415103
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. JUNDA, LESLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 G STREET
City SOUTH BOSTON State MA Zip Code 02127-2921
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415116
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. JUNG, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5324 LAURELRIDGE LANE
City CINCINNATI State OH Zip Code 45247-7951
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.347670
Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2493 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348486
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348499
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352502
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2494 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357457
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362422
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365021
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2495 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JUNGE, JAMES, , ,			Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111 D111			Transaction ID : SA11A.370242
City BRYN ATHYN	State PA	Zip Code 19009-8025	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 489.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JUNGE, JAMES, , ,			Date of Receipt MM / DD / YYYY 08 / 19 / 2016
Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111 D111			Transaction ID : SA11A.374791
City BRYN ATHYN	State PA	Zip Code 19009-8025	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 489.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JUNGE, JAMES, , ,			Date of Receipt MM / DD / YYYY 08 / 26 / 2016
Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111 D111			Transaction ID : SA11A.380689
City BRYN ATHYN	State PA	Zip Code 19009-8025	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 489.00		

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2496 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382183
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. JUNGE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3039 HUNTINGDON PIKE, SUITE D-111
 D111
 City BRYN ATHYN State PA Zip Code 19009-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384395
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. JURKONIS, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1134 JO LANE
 City GARDNERVILLE State NV Zip Code 89410-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN AVK CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.374099
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2497 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. JUSTUS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1398 N SHADELAND AVNEUE
 City INDIANAPOLIS State IN Zip Code 46219-3652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380956
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. JUSTUS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1398 N SHADELAND AVNEUE
 City INDIANAPOLIS State IN Zip Code 46219-3652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380957
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KADING, BRADLEY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 522 9TH STREET SE
 City WASHINGTON State DC Zip Code 20003-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABIR Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.402085
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2498 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAEDING, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 RIDGELAND DRIVE
 City BISMARCK State ND Zip Code 58503-6235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCN,LLC Occupation (for Individual) DIRECTOR OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358374
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KAEDING, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 RIDGELAND DRIVE
 City BISMARCK State ND Zip Code 58503-6235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCN,LLC Occupation (for Individual) DIRECTOR OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358378
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAEDING, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 RIDGELAND DRIVE
 City BISMARCK State ND Zip Code 58503-6235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCN,LLC Occupation (for Individual) DIRECTOR OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394545
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2499 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAEDING, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7701 RIDGELAND DRIVE

City BISMARCK	State ND	Zip Code 58503-6235
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DCN,LLC	Occupation (for Individual) DIRECTOR OF SALES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2016

Transaction ID : SA11A.394546

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KAESER, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43195 VIA SIENA

City INDIAN WELLS	State CA	Zip Code 92210-7820
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2016

Transaction ID : SA11A.354577

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. KAESGEN, DIETRICH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19460 FRAIZER DRIVE

City ROCKY RIVER	State OH	Zip Code 44116-1727
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2016

Transaction ID : SA11A.393884

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2500 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAESGEN, DIETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19460 FRAZIER DR
 City ROCKY RIVER State OH Zip Code 44116-1727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420276
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KAESGEN, DIETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19460 FRAZIER DR
 City ROCKY RIVER State OH Zip Code 44116-1727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420277
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASST.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376378
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2501 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASST.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.387416
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASST.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.392229
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASST.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.399030
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2502 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAGAHASTIAN, MARISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5041 N. GLEN ARDEN AVENUE
 City COVINA State CA Zip Code 91724-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE, INC. Occupation (for Individual) SR. LEGAL ADMIN. ASST.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.411482
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. KAHN, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5325 KATY FREEWAY STE 1
 City HOUSTON State TX Zip Code 77007-2287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HETTIG KAHN DEVELOPMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.383538
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. KAINU, ARNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18900 NE 74TH CT
 City BATTLE GROUND State WA Zip Code 98604-9470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352558
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2503 OF 5722
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAINU, ARNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18900 NE 74TH CT

City BATTLE GROUND	State WA	Zip Code 98604-9470
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **08 / 21 / 2016**
Transaction ID : SA11A.375970

Amount of Each Receipt this Period: **25.00**

Memo Item CONTRIBUTION

B. KAINU, ARNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18900 NE 74TH CT

City BATTLE GROUND	State WA	Zip Code 98604-9470
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **09 / 09 / 2016**
Transaction ID : SA11A.392027

Amount of Each Receipt this Period: **50.00**

Memo Item CONTRIBUTION

C. KAINU, ARNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18900 NE 74TH CT

City BATTLE GROUND	State WA	Zip Code 98604-9470
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt: **09 / 09 / 2016**
Transaction ID : SA11A.392028

Amount of Each Receipt this Period: **50.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **125.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2504 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAINU, ARNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18900 NE 74TH CT
 City BATTLE GROUND State WA Zip Code 98604-9470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401409
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KAINU, ARNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18900 NE 74TH CT
 City BATTLE GROUND State WA Zip Code 98604-9470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403783
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAINU, ARNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18900 NE 74TH CT
 City BATTLE GROUND State WA Zip Code 98604-9470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403789
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2505 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAISER, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 CHESTNUT

City WILMETTE	State IL	Zip Code 60091-1614
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378829

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KAISER, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 CHESTNUT

City WILMETTE	State IL	Zip Code 60091-1614
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380455

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KAISER, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 CHESTNUT

City WILMETTE	State IL	Zip Code 60091-1614
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384535

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2506 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KAISER, STEVE, , ,		Date of Receipt
Mailing Address 1120 CHESTNUT		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City WILMETTE	State IL	Zip Code 60091-1614
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.403747
Name of Employer (for Individual) SELF EMPLOYED		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) SALES		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KALDOR, ANDREW, , ,		Date of Receipt
Mailing Address 4 LEDGEWOOD CT		<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City WARREN	State NJ	Zip Code 07059-6751
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.355474
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KALIKOW, MARY, , MRS.,		Date of Receipt
Mailing Address 101 PARK AVE 25TH FL		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2016"/>
City NEW YORK	State NY	Zip Code 10178-0002
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.381666
Name of Employer (for Individual) NOT EMPLOYED		Amount of Each Receipt this Period <input type="text" value="50000.00"/>
Occupation (for Individual) NOT EMPLOYED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="50000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="50350.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2507 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALIKOW, PETER, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 PARK AVE, 25TH FLOOR
 City NEW YORK State NY Zip Code 10178-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HJ KALIKOW AND CO Occupation (for Individual) REAL ESTATE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.381667
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

B. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347307
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349547
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2508 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350662
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369969
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374563
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2509 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381779
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.398918
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KALISKI, JANICE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 GLENSIDE DRIVE
 City ROCKINGHAM State VA Zip Code 22801-2392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.417613
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2510 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALISKI, JANICE, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1665 GLENSIDE DRIVE

City ROCKINGHAM	State VA	Zip Code 22801-2392
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417623

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KALLOS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 MOUNT KATAHDIN TRAIL

City JOHNS CREEK	State GA	Zip Code 30022-7104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLA INC	Occupation (for Individual) PROF ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353588

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KALLOS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 MOUNT KATAHDIN TRAIL

City JOHNS CREEK	State GA	Zip Code 30022-7104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLA INC	Occupation (for Individual) PROF ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.363085

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2511 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALLOS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MOUNT KATAHDIN TRAIL
 City JOHNS CREEK State GA Zip Code 30022-7104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLA INC Occupation (for Individual) PROF ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390125
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KALLOS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MOUNT KATAHDIN TRAIL
 City JOHNS CREEK State GA Zip Code 30022-7104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLA INC Occupation (for Individual) PROF ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394232
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KALLOS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 MOUNT KATAHDIN TRAIL
 City JOHNS CREEK State GA Zip Code 30022-7104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLA INC Occupation (for Individual) PROF ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409483
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2512 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KALLOS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 830 MOUNT KATAHDIN TRAIL

City JOHNS CREEK	State GA	Zip Code 30022-7104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLA INC	Occupation (for Individual) PROF ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417713

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. KALOGEROS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 273 KEEFAUVER ROAD

City JOHNSON CITY	State TN	Zip Code 37615-4413
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEERLESS STEAK HOUSE	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407828

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. KALOGEROS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 273 KEEFAUVER ROAD

City JOHNSON CITY	State TN	Zip Code 37615-4413
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEERLESS STEAK HOUSE	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419088

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2513 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KALSI, MANMOHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13307 CAROUSEL COURT
 City HOUSTON State TX Zip Code 77041-6572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALSI ENGINEERING INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366545
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KALTER, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 BARNES ROAD W
 City STAMFORD State CT Zip Code 06902-1243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MASTERSON GROUP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382342
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KALTER, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 BARNES ROAD W
 City STAMFORD State CT Zip Code 06902-1243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MASTERSON GROUP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382343
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2514 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAMIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10380 WILSHIRE BLVD
 1504
 City LOS ANGELES State CA Zip Code 90024-4763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409449
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KAMIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10380 WILSHIRE BLVD
 1504
 City LOS ANGELES State CA Zip Code 90024-4763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409450
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KAMPFE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3224 ROCKWOOD LN W
 City ESTES PARK State CO Zip Code 80517-6800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349750
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2515 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAMPFE, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3224 ROCKWOOD LN W

City ESTES PARK	State CO	Zip Code 80517-6800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357451

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KAMPFE, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3224 ROCKWOOD LN W

City ESTES PARK	State CO	Zip Code 80517-6800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.361925

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KAMPFE, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3224 ROCKWOOD LN W

City ESTES PARK	State CO	Zip Code 80517-6800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368510

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2516 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAMPFE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3224 ROCKWOOD LN W
 City ESTES PARK State CO Zip Code 80517-6800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.374974
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KAMPFE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3224 ROCKWOOD LN W
 City ESTES PARK State CO Zip Code 80517-6800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397923
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAMPFE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3224 ROCKWOOD LN W
 City ESTES PARK State CO Zip Code 80517-6800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415977
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2517 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SUITE 212, 1000 URLIN AVE
 SUITE 212
 City COLUMBUS State OH Zip Code 43212-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 383.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345847
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SUITE 212, 1000 URLIN AVE
 SUITE 212
 City COLUMBUS State OH Zip Code 43212-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 383.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345848
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SUITE 212, 1000 URLIN AVE
 SUITE 212
 City COLUMBUS State OH Zip Code 43212-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 383.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345849
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 133.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2518 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAMPMEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SUITE 212, 1000 URLIN AVE
 SUITE 212
 City COLUMBUS State OH Zip Code 43212-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 383.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405910
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KANAVAS, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17570 SIERRA LANE
 City BROOKFIELD State WI Zip Code 53045-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL BEST & FRIEDRICH STR Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391336
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 PAWNEE LN
 City LEAWOOD State KS Zip Code 66224-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350677
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2519 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 PAWNEE LN
 City LEAWOOD State KS Zip Code 66224-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365088
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 PAWNEE LN
 City LEAWOOD State KS Zip Code 66224-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368497
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 PAWNEE LN
 City LEAWOOD State KS Zip Code 66224-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384543
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2520 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KANE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14000 PAWNEE LN
 City LEAWOOD State KS Zip Code 66224-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396674
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KANE, TIMOTHY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 RUSKIN RD
 City SNYDER State NY Zip Code 14226-4254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERRILL LYNCH Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385223
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. KANE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10816 ANDORA AVENUE
 City CHATSWORTH State CA Zip Code 91311-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396950
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2521 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KANG, MATTHEW, S., ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 3214 CHAPEL CREEK DR			Transaction ID : SA11A.421213
City PERRYSBURG	State OH	Zip Code 43551-8400	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KANOFF, CHRIS, , ,			Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 9301 WILSHIRE BOULEVARD SUITE 507			Transaction ID : SA11A.381270
City BEVERLY HILLS	State CA	Zip Code 90210-6150	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KANTER, CHRISTINE, V., ,			Date of Receipt MM / DD / YYYY 08 / 01 / 2016
Mailing Address 1750 CEDAR LANE			Transaction ID : SA11A.358633
City VILLANOVA	State PA	Zip Code 19085-2018	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2522 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAPP, WILLIAM, K., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8171 BAY COLONY DR APT 902

City NAPLES	State FL	Zip Code 34108-7564
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.346482

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. KARABINUS, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5756 TOWNSHIP RD 466

City LAKEVILLE	State OH	Zip Code 44638-9741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
314.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384226

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KARABINUS, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5756 TOWNSHIP RD 466

City LAKEVILLE	State OH	Zip Code 44638-9741
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
314.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390635

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2523 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARABINUS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5756 TOWNSHIP RD 466
 City LAKEVILLE State OH Zip Code 44638-9741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390636
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KARABINUS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5756 TOWNSHIP RD 466
 City LAKEVILLE State OH Zip Code 44638-9741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392215
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. KARABINUS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5756 TOWNSHIP RD 466
 City LAKEVILLE State OH Zip Code 44638-9741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404300
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2524 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARMANOS, DANIELLE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4740 DOW RIDGE

City ORCHARD LAKE	State MI	Zip Code 48324-2327
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WORK IT OUT	Occupation (for Individual) FOUNDER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2016

Transaction ID : SA11A.351331

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

B. KARMANOS, PETER, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4740 DOW RIDGE

City WEST BLOOMFIELD	State MI	Zip Code 48324-2327
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAROLINA HURRICANES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2016

Transaction ID : SA11A.351332

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

C. KARP, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1500 LANCEWOOD TERRACE

City PALM CITY	State FL	Zip Code 34990-8017
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.350759

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2525 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARP, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LANCEWOOD TERRACE
 City PALM CITY State FL Zip Code 34990-8017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411698
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KARRICK, WAYNE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30223 STATE HIGHWAY 112
 City SELIGMAN State MO Zip Code 65745-7393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371074
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KARWEL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12796 YATES FORD RD
 City CLIFTON State VA Zip Code 20124-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERNST & YOUNG LLP Occupation (for Individual) PRINCIPALL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422646
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2526 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KARWEL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12796 YATES FORD RD
 City CLIFTON State VA Zip Code 20124-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERNST & YOUNG LLP Occupation (for Individual) PRINCIPALL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422647
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. KARWICK, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 ROAD G
 City CORTEZ State CO Zip Code 81321-9570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMPBIRD MANGE CO LLC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413644
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KASHIAN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 E RIVER PARK CIRCLE
 City FRESNO State CA Zip Code 93720-1575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 04 / 2016
Transaction ID : SA11A.344186
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2527 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASHIAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10345 MISSISSIPPI AVENUE
 City LOS ANGELES State CA Zip Code 90025-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385763
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KASHIAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10345 MISSISSIPPI AVENUE
 City LOS ANGELES State CA Zip Code 90025-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419349
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KASPUTYS, JOSEPH, E., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WINTER STREET
 City WALTHAM State MA Zip Code 02451-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376521
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2528 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASPUTYS, JOSEPH, E., MR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WINTER STREET
 City WALTHAM State MA Zip Code 02451-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 03 / 2016
Transaction ID : SA11A.389196
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KASPUTYS, JOSEPH, E., MR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WINTER STREET
 City WALTHAM State MA Zip Code 02451-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416930
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KASTEN, G. FREDERICK, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 LOGGERHEAD POINT
 City VERO BEACH State FL Zip Code 32963-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.371560
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2529 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASZTON, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 VAN GOGH WAY
 City COTO DE CAZA State CA Zip Code 92679-8503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357305
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KASZTON, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 VAN GOGH WAY
 City COTO DE CAZA State CA Zip Code 92679-8503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.366559
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KASZTON, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 VAN GOGH WAY
 City COTO DE CAZA State CA Zip Code 92679-8503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382687
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2530 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KASZTON, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 VAN GOGH WAY
 City COTO DE CAZA State CA Zip Code 92679-8503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405439
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. KATZ, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 WEST 110TH STREET APT 11A
 City NEW YORK State NY Zip Code 10025-2015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349604
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KATZ, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 WEST 110TH STREET APT 11A
 City NEW YORK State NY Zip Code 10025-2015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384560
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2531 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KATZ, HOWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 WEST 110TH STREET
APT 11A

City NEW YORK State NY Zip Code 10025-2015

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.415854

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. KATZ, JASON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5540 LAUSANNE DR

City RENO State NV Zip Code 89511-5022

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.390379

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. KATZ, SONDR A, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10676 WILKINS AVENUE, UNIT 402
STE. 402

City LOS ANGELES State CA Zip Code 90024-5882

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PERSONAL INVESTMENTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.373416

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2532 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KATZEN, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 134 WEST MOUNTAIN RD
City SPARTA State NJ Zip Code 07871-3526
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418902
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KAUFFMAN, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2006 HAY TERRACE
City EASTON State PA Zip Code 18042-4617
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362468
Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. KAUFFMAN, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2006 HAY TERRACE
City EASTON State PA Zip Code 18042-4617
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365159
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1109.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2533 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFFMAN, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2006 HAY TERRACE
City EASTON State PA Zip Code 18042-4617
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374516
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KAUFFMAN, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2006 HAY TERRACE
City EASTON State PA Zip Code 18042-4617
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411028
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAUFFMAN, JEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 146 S. SPRUCE ST.
City LITITZ State PA Zip Code 17543-1826
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.357773
Amount of Each Receipt this Period 48.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 198.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2534 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFFMAN, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 S. SPRUCE ST.
 City LITITZ State PA Zip Code 17543-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368564
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KAUFFMAN, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 S. SPRUCE ST.
 City LITITZ State PA Zip Code 17543-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379802
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KAUFFMAN, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 S. SPRUCE ST.
 City LITITZ State PA Zip Code 17543-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379803
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2535 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFFMAN, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 S. SPRUCE ST.
 City LITITZ State PA Zip Code 17543-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396941
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KAUFFMAN, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 S. SPRUCE ST.
 City LITITZ State PA Zip Code 17543-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419192
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KAUFFMAN, JOHN, H., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14319 MUIRFIELD LANE
 City HOUSTON State TX Zip Code 77095-3409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN H KAUFFMAN III Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352442
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2536 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFFMAN, JOHN, H., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14319 MUIRFIELD LANE
 City HOUSTON State TX Zip Code 77095-3409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN H KAUFFMAN III Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375938
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KAUFFMAN, JOHN, H., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14319 MUIRFIELD LANE
 City HOUSTON State TX Zip Code 77095-3409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN H KAUFFMAN III Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.396697
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAUFFMAN, JOHN, H., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14319 MUIRFIELD LANE
 City HOUSTON State TX Zip Code 77095-3409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN H KAUFFMAN III Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401517
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2537 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **07 / 08 / 2016**
Transaction ID : SA11A.346705
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **07 / 16 / 2016**
Transaction ID : SA11A.349037
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359788
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2538 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366629
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387750
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415564
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2539 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KAUFMANN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 778 INDIAN HILLS RD.
 City FONTANA State WI Zip Code 53125-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KEARNEY, LEE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7611 SE EVERGREEN HIGHWAY
 City VANCOUVER State WA Zip Code 98664-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383262
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. KEEFE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 SARASOTA CENTER BLVD
 City SARASOTA State FL Zip Code 34240-7852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALARM SPESIALIST CORP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401246
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2540 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KEEGAN, HOWARD, , ,

Mailing Address 1029 RAY STREET

City MANCHESTER State NH Zip Code 03104-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11A.366133

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KEEGAN, HOWARD, , ,

Mailing Address 1029 RAY STREET

City MANCHESTER State NH Zip Code 03104-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016

Transaction ID : SA11A.378461

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KEEGAN, HOWARD, , ,

Mailing Address 1029 RAY STREET

City MANCHESTER State NH Zip Code 03104-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11A.406590

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2541 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357531
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382708
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KEEHAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 JAYCOX RD.
 City AVON State OH Zip Code 44011-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APC,INC. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413005
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2542 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEELEY, P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **4 BEVERLY LANE**
 City **HATHOM WOODS** State **IL** Zip Code **60047-7626**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389858
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

B. KEELEY, TERRENCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **24 WEST 70**
2
 City **NEW YORK** State **NY** Zip Code **10023-4643**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **BLACKROCK** Occupation (for Individual) **MANAGING DIRECTOR**
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ **20000.00**

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390861
 Amount of Each Receipt this Period **20000.00**
 Memo Item
CONTRIBUTION

C. KEENAN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **6513 CHALFONT CIRCLE**
 City **WILMINGTON** State **NC** Zip Code **28405-4365**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364330
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2543 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEENAN, PHILIP, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4825 PASEO DE LAS TORTUGAS
 City TORRANCE State CA Zip Code 90505-6337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395848
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KEENEY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4784 S. UPHAM CT.
 City LITTLETON State CO Zip Code 80123-6303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359864
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KEENEY, RUDOLPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 E 2ND STREET
 City DUMAS State TX Zip Code 79029-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365972
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2544 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEESHAN, JIM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 N CAROLINA PARK
 City CONROE State TX Zip Code 77302-3024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396255
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KEIFITZ, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 BROADWAY STE 408
 City NEW YORK State NY Zip Code 10006-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400480
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382581
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2545 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390166
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390426
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390427
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2546 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391721
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391722
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394277
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2547 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397648
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398947
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402759
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2548 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402760
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407748
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407749
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2549 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408335
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408338
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413054
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2550 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS State MO Zip Code 63367-2238

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1910.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.413698

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS State MO Zip Code 63367-2238

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1910.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.413700

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KEINATH, WARREN, , ,

Mailing Address 24 RAVENS POINTE DR.

City LAKE SAINT LOUIS State MO Zip Code 63367-2238

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1910.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.413895

Amount of Each Receipt this Period
 75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2551 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418168
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2552 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418169
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KEINATH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1910.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419873
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KEITH, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 247
 City CHILMARK State MA Zip Code 02535-0247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348519
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2553 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KEITH, ALLAN, , ,			Date of Receipt MM / DD / YYYY 08 / 14 / 2016 Transaction ID : SA11A.366696		
Mailing Address P. O. BOX 247			Amount of Each Receipt this Period 50.00		
City CHILMARK	State MA	Zip Code 02535-0247	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KEITH, ALLAN, , ,			Date of Receipt MM / DD / YYYY 09 / 23 / 2016 Transaction ID : SA11A.404796		
Mailing Address P. O. BOX 247			Amount of Each Receipt this Period 75.00		
City CHILMARK	State MA	Zip Code 02535-0247	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KEITH, ALLAN, , ,			Date of Receipt MM / DD / YYYY 09 / 23 / 2016 Transaction ID : SA11A.404800		
Mailing Address P. O. BOX 247			Amount of Each Receipt this Period 75.00		
City CHILMARK	State MA	Zip Code 02535-0247	Memo Item <input type="checkbox"/> CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2554 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 COUNTRY BROOK DRIVE
 2422
 City KELLER State TX Zip Code 76248-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.376396
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KELLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 COUNTRY BROOK DRIVE
 2422
 City KELLER State TX Zip Code 76248-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 08 / 19 / 2016
Transaction ID : SA11A.376397
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KELLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 COUNTRY BROOK DRIVE
 2422
 City KELLER State TX Zip Code 76248-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.379957
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2555 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 COUNTRY BROOK DRIVE
 2422
 City KELLER State TX Zip Code 76248-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.379958
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KELLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 COUNTRY BROOK DRIVE
 2422
 City KELLER State TX Zip Code 76248-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.387504
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KELLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 COUNTRY BROOK DRIVE
 2422
 City KELLER State TX Zip Code 76248-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.387506
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2556 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 COUNTRY BROOK DRIVE
 2422
 City KELLER State TX Zip Code 76248-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.411934
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KELLER, CHARLENE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2524 LAKE BEND TERRACE
 City CARROLLTON State TX Zip Code 75006-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358611
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381956
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2557 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391250
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391252
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391253
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2558 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391254
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403269
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403280
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2559 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416094
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422376
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KELLER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 WOODRUSH CT
 City DARIEN State IL Zip Code 60561-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422377
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2560 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLEHER, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9707 OLD GEORGETOWN ROAD
 City BETHESDA State MD Zip Code 20814-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409681
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. KELLER, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON ROAD
 City WAYNE State PA Zip Code 19087-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386295
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KELLER, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON ROAD
 City WAYNE State PA Zip Code 19087-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386297
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2561 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON ROAD
 City WAYNE State PA Zip Code 19087-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399297
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KELLER, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON ROAD
 City WAYNE State PA Zip Code 19087-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399299
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KELLER, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON ROAD
 City WAYNE State PA Zip Code 19087-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.411726
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2562 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON ROAD
 City WAYNE State PA Zip Code 19087-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.411727
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KELLER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5929 WILD HORSE RUN
 City COLLEGE STATION State TX Zip Code 77845-2346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M FDN. Occupation (for Individual) DIRECTOR OF DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364114
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KELLER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5929 WILD HORSE RUN
 City COLLEGE STATION State TX Zip Code 77845-2346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M FDN. Occupation (for Individual) DIRECTOR OF DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378771
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2563 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5929 WILD HORSE RUN

City COLLEGE STATION	State TX	Zip Code 77845-2346
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M FDN.	Occupation (for Individual) DIRECTOR OF DEVELOPMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398794

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KELLER, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5929 WILD HORSE RUN

City COLLEGE STATION	State TX	Zip Code 77845-2346
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M FDN.	Occupation (for Individual) DIRECTOR OF DEVELOPMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404975

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KELLER, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5929 WILD HORSE RUN

City COLLEGE STATION	State TX	Zip Code 77845-2346
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS A&M FDN.	Occupation (for Individual) DIRECTOR OF DEVELOPMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419054

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2564 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372648
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404287
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408522
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2565 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410046
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410047
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KELLEHER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 HAWTHORNE DR
 City AMARILLO State TX Zip Code 79109-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422244
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 2566 OF 5722	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2621 S ILLINOIS AVENUE
 City CARBONDALE State IL Zip Code 62903-5915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.392522
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. KELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15911 EDWARDS DR. # 2
 City AUSTIN State TX Zip Code 78734-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN ENGINEERING CO. INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 07 / 25 / 2016
Transaction ID : SA11A.354463
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15911 EDWARDS DR. # 2
 City AUSTIN State TX Zip Code 78734-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN ENGINEERING CO. INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382354
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2567 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15911 EDWARDS DR. # 2
 City AUSTIN State TX Zip Code 78734-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN ENGINEERING CO. INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.398003
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15911 EDWARDS DR. # 2
 City AUSTIN State TX Zip Code 78734-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN ENGINEERING CO. INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403314
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15911 EDWARDS DR. # 2
 City AUSTIN State TX Zip Code 78734-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN ENGINEERING CO. INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.416107
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2568 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8937 CRICHTON WOODS CT

City ORLANDO	State FL	Zip Code 32819-4809
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUSOBOX CORP	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374628

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KELLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8937 CRICHTON WOODS CT

City ORLANDO	State FL	Zip Code 32819-4809
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUSOBOX CORP	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398278

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KELLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8937 CRICHTON WOODS CT

City ORLANDO	State FL	Zip Code 32819-4809
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DUSOBOX CORP	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399633

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2569 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLOGG, DONNA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11991 36TH STREET NW
 City WATFORD CITY State ND Zip Code 58854-9633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414470
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KELLY, CAROLYN, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1041
 City OURAY State CO Zip Code 81427-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389532
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. KELLY, CAROLYN, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1041
 City OURAY State CO Zip Code 81427-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414519
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2570 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 DUNES BLUFF
 City NEWPORT COAST State CA Zip Code 92657-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377757
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. KELLY, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 DUNES BLUFF
 City NEWPORT COAST State CA Zip Code 92657-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414434
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. KELLY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 E ALAMEDA STREET, APT 240
 City SANTA FE State NM Zip Code 87501-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393841
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2571 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 LAWRENCE AVENUE
 City WESTFIELD State NJ Zip Code 07090-3117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS J. KELLY ASSOCIATES Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390820
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. KELLY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S BUCKLEY RD UNIT I-287
 City AURORA State CO Zip Code 80017-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SFA COLORADO Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363870
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KELLY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S BUCKLEY RD UNIT I-287
 City AURORA State CO Zip Code 80017-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SFA COLORADO Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370473
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2572 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 S BUCKLEY RD
UNIT I-287

City AURORA State CO Zip Code 80017-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SFA COLORADO Occupation (for Individual) SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374129

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. KELLY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 S BUCKLEY RD
UNIT I-287

City AURORA State CO Zip Code 80017-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SFA COLORADO Occupation (for Individual) SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391787

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. KELLY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 S BUCKLEY RD
UNIT I-287

City AURORA State CO Zip Code 80017-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SFA COLORADO Occupation (for Individual) SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392142

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2573 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KELLY, MICHAEL, , ,

Mailing Address 1250 S BUCKLEY RD
UNIT I-287

City AURORA State CO Zip Code 80017-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SFA COLORADO Occupation (for Individual) SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2016

Transaction ID : SA11A.400169

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KELLY, NANCY, , ,

Mailing Address 4156 H STREET ROAD

City BLAINE State WA Zip Code 98230-9228

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLY MEDICAL SERVICES,INC. Occupation (for Individual) SECRETARY/TREASUER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2016

Transaction ID : SA11A.353253

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KELLY, NANCY, , ,

Mailing Address 4156 H STREET ROAD

City BLAINE State WA Zip Code 98230-9228

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLY MEDICAL SERVICES,INC. Occupation (for Individual) SECRETARY/TREASUER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
271.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2016

Transaction ID : SA11A.353254

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2574 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4156 H STREET ROAD
 City BLAINE State WA Zip Code 98230-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY MEDICAL SERVICES,INC. Occupation (for Individual) SECRETARY/TREASUER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt
 08 / 04 / 2016
Transaction ID : SA11A.362211
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KELLY, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4156 H STREET ROAD
 City BLAINE State WA Zip Code 98230-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY MEDICAL SERVICES,INC. Occupation (for Individual) SECRETARY/TREASUER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.379840
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KELLY, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4156 H STREET ROAD
 City BLAINE State WA Zip Code 98230-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY MEDICAL SERVICES,INC. Occupation (for Individual) SECRETARY/TREASUER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.391996
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2575 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELLY, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4156 H STREET ROAD
 City BLAINE State WA Zip Code 98230-9228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLY MEDICAL SERVICES,INC. Occupation (for Individual) SECRETARY/TREASUER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.391997
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KELLY, PAMELA, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 196 N CANYON VIEW DRIVE
 City LOS ANGELES State CA Zip Code 90049-2722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349920
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KELLY, SHIRLEY, A., MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4214 RIDGEWAY
 City SAN DIEGO State CA Zip Code 92116-2049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391393
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 605.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2576 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KELSEY, MARK, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 N GRENOLA STREET
 City PACIFIC PALISADES State CA Zip Code 90272-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELSEY NATIONAL CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358764
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KELSEY, MARK, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 N GRENOLA STREET
 City PACIFIC PALISADES State CA Zip Code 90272-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELSEY NATIONAL CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392850
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KELSEY, THOMAS, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5313 BAYOU GLEN
 City HOUSTON State TX Zip Code 77056-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395919
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2577 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEMBLE, LAURIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1716 WEDTERN AVE

City FORT WORTH	State TX	Zip Code 76107-3850
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415087

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. KEMMERER, JOHN, L., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 6848

City JACKSON	State WY	Zip Code 83002-6848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACKSON HOLE MOUNTAIN RESORT	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.375445

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. KEMMERER, JOHN, L., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 6848

City JACKSON	State WY	Zip Code 83002-6848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACKSON HOLE MOUNTAIN RESORT	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.398468

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2578 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEMMERER, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 N MAIN STREET
 City CRANBURY State NJ Zip Code 08512-3247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MESAVERDA, INC Occupation (for Individual) FINANCE MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.374086
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. KEMP, JOANNE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7904 GREENTREE ROAD
 City BETHESDA State MD Zip Code 20817-1302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362858
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KEMP, JOANNE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7904 GREENTREE ROAD
 City BETHESDA State MD Zip Code 20817-1302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362870
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2579 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEMPER, ROBERT, L., ,

Mailing Address **41780 BUTTERFIELD STAGE RD**
#C119

City **TEMECULA** State **CA** Zip Code **92592-9206**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 22 / 2016

Transaction ID : SA11A.353334

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEMPER, ROBERT, L., ,

Mailing Address **41780 BUTTERFIELD STAGE RD**
#C119

City **TEMECULA** State **CA** Zip Code **92592-9206**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 22 / 2016

Transaction ID : SA11A.353337

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEMPER, ROBERT, L., ,

Mailing Address **41780 BUTTERFIELD STAGE RD**
#C119

City **TEMECULA** State **CA** Zip Code **92592-9206**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 23 / 2016

Transaction ID : SA11A.377404

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2580 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEMPER, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41780 BUTTERFIELD STAGE RD
 #C119
 City TEMECULA State CA Zip Code 92592-9206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390281
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KEMPER, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41780 BUTTERFIELD STAGE RD
 #C119
 City TEMECULA State CA Zip Code 92592-9206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390361
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KENDALL, GLENNA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9816 24TH AVE NW
 City SEATTLE State WA Zip Code 98117-2507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361364
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2581 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENDALL, GLENNA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9816 24TH AVE NW
 City SEATTLE State WA Zip Code 98117-2507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.376528
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KENDALL, GLENNA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9816 24TH AVE NW
 City SEATTLE State WA Zip Code 98117-2507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.397122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST. UNIT 335
 City PORTLAND State OR Zip Code 97239-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.349792
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2582 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 02 / 2016
Transaction ID : SA11A.360162
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.364165
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368411
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2583 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388782
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392138
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KENDRICK, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0841 SW GAINES ST.
 UNIT 335
 City PORTLAND State OR Zip Code 97239-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2016
Transaction ID : SA11A.393795
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2584 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KENDRICK, LLOYD, , ,

Mailing Address **0841 SW GAINES ST.
UNIT 335**

City **PORTLAND** State **OR** Zip Code **97239-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 23 / 2016**

Transaction ID : SA11A.409459

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KENDRICK, LLOYD, , ,

Mailing Address **0841 SW GAINES ST.
UNIT 335**

City **PORTLAND** State **OR** Zip Code **97239-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 29 / 2016**

Transaction ID : SA11A.420133

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KENEALLY, KATHY, , MRS.,

Mailing Address **PO BOX 80150**

City **BILLINGS** State **MT** Zip Code **59108-0150**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **HARKEN SUPPLY** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 23 / 2016**

Transaction ID : SA11A.377121

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **550.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2585 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNA, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 162 FAIR OAKS LANE

City ATHERTON	State CA	Zip Code 94027-3058
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMCO ELECTRONICS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359854

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KENNA, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 162 FAIR OAKS LANE

City ATHERTON	State CA	Zip Code 94027-3058
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMCO ELECTRONICS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384794

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KENNA, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 162 FAIR OAKS LANE

City ATHERTON	State CA	Zip Code 94027-3058
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMCO ELECTRONICS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419056

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2586 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNA, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 FAIR OAKS LANE
 City ATHERTON State CA Zip Code 94027-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIMCO ELECTRONICS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419601
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KENNEDY, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 S SIERRA VISTA AVE
 City ALHAMBRA State CA Zip Code 91801-4818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348950
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KENNEDY, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 S SIERRA VISTA AVE
 City ALHAMBRA State CA Zip Code 91801-4818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356350
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2587 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNEDY, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 S SIERRA VISTA AVE
 City ALHAMBRA State CA Zip Code 91801-4818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383058
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. KENNEDY, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 S SIERRA VISTA AVE
 City ALHAMBRA State CA Zip Code 91801-4818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411250
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KENNEDY, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 MINT SPRING CIRCLE
 City BRENTWOOD State TN Zip Code 37027-4470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388937
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2588 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KENNEDY, NANCY, , ,

Mailing Address P.O. BOX 72080

City CEDARBURG	State WI	Zip Code 53012-7280
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016

Transaction ID : SA11A.359691

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KENNEDY, NANCY, , ,

Mailing Address P.O. BOX 72080

City CEDARBURG	State WI	Zip Code 53012-7280
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.404333

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KENNEDY, NANCY, , ,

Mailing Address P.O. BOX 72080

City CEDARBURG	State WI	Zip Code 53012-7280
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.404334

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2589 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNEDY, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 72080
 City CEDARBURG State WI Zip Code 53012-7280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405433
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. KENNEDY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 E PECAN STREET SUITE 2810
 City SAN ANTONIO State TX Zip Code 78205-1586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.347208
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. KENNEDY, ROBERT, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4215 SW 58TH ST
 City REDMOND State OR Zip Code 97756-9528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416855
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2590 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENNY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2275 DRURY LN
 City NORTHFIELD State IL Zip Code 60093-3122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409288
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KENT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3257 FALCON DR
 City ABILENE State TX Zip Code 79606-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.354895
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. KENT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3257 FALCON DR
 City ABILENE State TX Zip Code 79606-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370207
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2591 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3257 FALCON DR
 City ABILENE State TX Zip Code 79606-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384337
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. KENT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3257 FALCON DR
 City ABILENE State TX Zip Code 79606-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414060
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. KENYON, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 S NEWCOMBE CT
 City LITTLETON State CO Zip Code 80127-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349656
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2592 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KENYON, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 S NEWCOMBE CT
 City LITTLETON State CO Zip Code 80127-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400086
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KENYON, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 S NEWCOMBE CT
 City LITTLETON State CO Zip Code 80127-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414037
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KERAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3215 PARADISE DRIVE
 City BELVEDERE TIBURON State CA Zip Code 94920-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393834
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2593 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERBER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3365 STONY POINT ROAD
 City CHARLOTTESVILLE State VA Zip Code 22911-6258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS MAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361514
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344467
 Amount of Each Receipt this Period 32.00
 Memo Item
 CONTRIBUTION

C. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344468
 Amount of Each Receipt this Period 32.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 564.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2594 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344469
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.349891
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378838
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	82.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2595 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398110
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398127
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403669
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2596 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERN, DON, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4348 COUNTY ROAD O
 City ELLSWORTH State WI Zip Code 54011-4625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLINT HILLS RESOURCES LP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403688
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KERNS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 CANTLE CIR
 City OKLAHOMA CITY State OK Zip Code 73120-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKLAHOMA HEART HOSPITAL PHYSICIANS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349762
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KERNS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 CANTLE CIR
 City OKLAHOMA CITY State OK Zip Code 73120-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKLAHOMA HEART HOSPITAL PHYSICIANS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388792
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2597 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERNS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 CANTLE CIR
 City OKLAHOMA CITY State OK Zip Code 73120-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKLAHOMA HEART HOSPITAL PHYSICIANS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406307
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KERNS, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 CANTLE CIR
 City OKLAHOMA CITY State OK Zip Code 73120-8039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKLAHOMA HEART HOSPITAL PHYSICIANS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414332
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KEROLA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 RAVINE DR
 City HUBBARD State OH Zip Code 44425-2269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) P.I.&I. MOTOR EXPRESS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388150
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2598 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERR, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 125 STREET CT E
 City PUYALLUP State WA Zip Code 98373-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 17 / 2016**
Transaction ID : SA11A.349019
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KERR, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 125 STREET CT E
 City PUYALLUP State WA Zip Code 98373-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370551
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KERR, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 125 STREET CT E
 City PUYALLUP State WA Zip Code 98373-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400270
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2599 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KERR, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 BOYD AVENUE
 City MIDLAND State TX Zip Code 79705-8604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354454
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KERR, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 BOYD AVENUE
 City MIDLAND State TX Zip Code 79705-8604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373181
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KERR, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 BOYD AVENUE
 City MIDLAND State TX Zip Code 79705-8604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373217
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2600 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERR, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 BOYD AVENUE
 City MIDLAND State TX Zip Code 79705-8604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KERR, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 BOYD AVENUE
 City MIDLAND State TX Zip Code 79705-8604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380035
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KERSTEN, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5201 CHANTREY RD.
 City EDINA State MN Zip Code 55436-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) KERSTEN1@COMCAST.NET
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357587
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2601 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERSTEN, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5201 CHANTREY RD.
 City EDINA State MN Zip Code 55436-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) KERSTEN1@COMCAST.NET
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382764
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KERSTEN, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5201 CHANTREY RD.
 City EDINA State MN Zip Code 55436-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) KERSTEN1@COMCAST.NET
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408532
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KERSTEN, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5201 CHANTREY RD.
 City EDINA State MN Zip Code 55436-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) KERSTEN1@COMCAST.NET
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413140
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2602 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KERWIN, JOSEPH, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10411 RIVER ROAD
 City COLLEGE STATION State TX Zip Code 77845-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382977
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KERWIN, JOSEPH, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10411 RIVER ROAD
 City COLLEGE STATION State TX Zip Code 77845-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415667
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KESMAN, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 LONGMEADOW LANE
 City LAKE FOREST State IL Zip Code 60045-1581
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRIVATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419853
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2603 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KESSEL, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19424 GULF BLVD
 302
 City INDIAN SHORES State FL Zip Code 33785-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349572
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. KESSEL, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19424 GULF BLVD
 302
 City INDIAN SHORES State FL Zip Code 33785-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.419968
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KESSEL, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19424 GULF BLVD
 302
 City INDIAN SHORES State FL Zip Code 33785-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.419970
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2604 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KESSINGER, RANDALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.351049

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. KESSINGER, RANDALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.369125

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. KESSINGER, RANDALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2016

Transaction ID : SA11A.399251

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2605 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KESSINGER, RANDALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403838

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. KESSINGER, RANDALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408624

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KESSINGER, RANDALL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411421

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2606 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KESSINGER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 36212

City ROCK HILL	State SC	Zip Code 29732-0503
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411423

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KESSLER, JUDD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4907 BROOKWAY DR.

City BETHESDA	State MD	Zip Code 20816-1909
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PORTER WRIGHT LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350312

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KHAN, AHMAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6015 CHARRINGTON DRIVE

City SPRING	State TX	Zip Code 77389-2933
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D.R.HORTON	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351924

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2607 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KHAN, AHMAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6015 CHARRINGTON DRIVE

City SPRING	State TX	Zip Code 77389-2933
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D.R.HORTON	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.387014

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KHUHRO, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6331 DPRUCEFIELD DRIVE

City OFALLON	State MO	Zip Code 63368-7842
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355404

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KHUHRO, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6331 DPRUCEFIELD DRIVE

City OFALLON	State MO	Zip Code 63368-7842
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355406

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2608 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KHUHRO, AMY, , ,

Mailing Address 6331 DPRUCEFIELD DRIVE

City OFALLON State MO Zip Code 63368-7842

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2016

Transaction ID : SA11A.362081

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KHUHRO, AMY, , ,

Mailing Address 6331 DPRUCEFIELD DRIVE

City OFALLON State MO Zip Code 63368-7842

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2016

Transaction ID : SA11A.362084

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KHUHRO, AMY, , ,

Mailing Address 6331 DPRUCEFIELD DRIVE

City OFALLON State MO Zip Code 63368-7842

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) HR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2016

Transaction ID : SA11A.362086

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2609 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KHUHRO, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6331 DPRUCEFIELD DRIVE
 City OFALLON State MO Zip Code 63368-7842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364830
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. KHUHRO, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6331 DPRUCEFIELD DRIVE
 City OFALLON State MO Zip Code 63368-7842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364831
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. KHUHRO, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6331 DPRUCEFIELD DRIVE
 City OFALLON State MO Zip Code 63368-7842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383150
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2610 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KHUHRO, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6331 DPRUCEFIELD DRIVE

City OFALLON	State MO	Zip Code 63368-7842
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES	Occupation (for Individual) HR
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403808

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KICKHAM, EDWARD, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2470 INGLEHILL PTE.

City BLOOMFIELD HILLS	State MI	Zip Code 48304-1462
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KICKHAM HANLEY PLLC	Occupation (for Individual) KICKHAM HANLEY PLLC
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
631.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344379

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

C. KICKHAM, EDWARD, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2470 INGLEHILL PTE.

City BLOOMFIELD HILLS	State MI	Zip Code 48304-1462
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KICKHAM HANLEY PLLC	Occupation (for Individual) KICKHAM HANLEY PLLC
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
631.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368056

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	256.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2611 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KICKHAM, EDWARD, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2470 INGLEHILL PTE.
 City BLOOMFIELD HILLS State MI Zip Code 48304-1462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KICKHAM HANLEY PLLC Occupation (for Individual) KICKHAM HANLEY PLLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 631.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391651
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. KICKHAM, EDWARD, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2470 INGLEHILL PTE.
 City BLOOMFIELD HILLS State MI Zip Code 48304-1462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KICKHAM HANLEY PLLC Occupation (for Individual) KICKHAM HANLEY PLLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 631.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409408
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. KICKHAM, EDWARD, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2470 INGLEHILL PTE.
 City BLOOMFIELD HILLS State MI Zip Code 48304-1462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KICKHAM HANLEY PLLC Occupation (for Individual) KICKHAM HANLEY PLLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 631.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409411
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2612 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIEFER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 EAGLEHEAD TER APT 6
 City SHREWSBURY State MA Zip Code 01545-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358583
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KIER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8218 CAPTAIN HAWKINS COURT
 City ANNANDALE State VA Zip Code 22003-4602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383284
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KIERMEIER, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 HEMPSTEAD TURNPIKE APT 116 APT 116
 City FRANKLIN SQUARE State NY Zip Code 11010-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360067
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2613 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KIES, PHILLIP, , ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016
Mailing Address 709 DOGWOOD DRIVE		Transaction ID : SA11A.385786
City LONG BEACH	State MS	Zip Code 39560-3806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KIES, PHILLIP, , ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016
Mailing Address 709 DOGWOOD DRIVE		Transaction ID : SA11A.385788
City LONG BEACH	State MS	Zip Code 39560-3806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KIES, PHILLIP, , ,		Date of Receipt MM / DD / YYYY 09 / 13 / 2016
Mailing Address 709 DOGWOOD DRIVE		Transaction ID : SA11A.394300
City LONG BEACH	State MS	Zip Code 39560-3806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2614 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIES, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 DOGWOOD DRIVE
 City LONG BEACH State MS Zip Code 39560-3806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402831
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KIESENDAHL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 731 WELCOME LAKE ROAD
 City HAWLEY State PA Zip Code 18428-7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOODLOCH PINES, INC. Occupation (for Individual) HOSPITALITY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.361025
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KIESENDAHL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 731 WELCOME LAKE ROAD
 City HAWLEY State PA Zip Code 18428-7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOODLOCH PINES, INC. Occupation (for Individual) HOSPITALITY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373797
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2615 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIESENDAHL, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 731 WELCOME LAKE ROAD

City HAWLEY	State PA	Zip Code 18428-7840
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WOODLOCH PINES, INC.	Occupation (for Individual) HOSPITALITY CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407856

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KIESENDAHL, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 731 WELCOME LAKE ROAD

City HAWLEY	State PA	Zip Code 18428-7840
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WOODLOCH PINES, INC.	Occupation (for Individual) HOSPITALITY CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407857

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KIESSLING, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13640 JARVI DRIVE

City ANCHORAGE	State AK	Zip Code 99515-3934
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387956

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2616 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KILBURN, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28306 N. 114TH PL.
 City SCOTTSDALE State AZ Zip Code 85262-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349074
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KILBURN, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28306 N. 114TH PL.
 City SCOTTSDALE State AZ Zip Code 85262-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354442
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KILBURN, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28306 N. 114TH PL.
 City SCOTTSDALE State AZ Zip Code 85262-4723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357511
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2617 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KILBURN, EDWIN, , ,

Mailing Address 28306 N. 114TH PL.

City SCOTTSDALE State AZ Zip Code 85262-4723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : SA11A.363772

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KILBURN, EDWIN, , ,

Mailing Address 28306 N. 114TH PL.

City SCOTTSDALE State AZ Zip Code 85262-4723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016

Transaction ID : SA11A.385198

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KILBURN, EDWIN, , ,

Mailing Address 28306 N. 114TH PL.

City SCOTTSDALE State AZ Zip Code 85262-4723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016

Transaction ID : SA11A.413031

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2618 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KILLEN, DAVID, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 1183

City CONIFER	State CO	Zip Code 80433-1183
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2175.00

Date of Receipt
08 / 01 / 2016
Transaction ID : SA11A.358740

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. KILTS, JAMES, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 96 CONYERS FARM DR

City GREENWICH	State CT	Zip Code 06831-2735
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) CENTERVIEW PARTNERS		Occupation (for Individual) PARTNER/FOUNDER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 41100.00

Date of Receipt
09 / 21 / 2016
Transaction ID : SA11A.400512

Amount of Each Receipt this Period
41100.00

Memo Item CONTRIBUTION

C. KIM, JHONG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 MORNINGSTAR ROAD

City STATEN ISLAND	State NY	Zip Code 10303-2836
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RICHMOND IHOP LLC		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.422990

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	43100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2619 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KIM, JHONG, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 501 MORNINGSTAR ROAD		Transaction ID : SA11A.422993
City STATEN ISLAND	State NY	Zip Code 10303-2836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) RICHMOND IHOP LLC	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KIMBALL, MARK, , ,		Date of Receipt MM / DD / YYYY 08 / 16 / 2016
Mailing Address 777 108TH AVENUE NE #2000		Transaction ID : SA11A.368464
City BELLEVUE	State WA	Zip Code 98004-5146
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) MDK LAW	Occupation (for Individual) ATTORNEY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KIMBER, CLARENCE, , ,		Date of Receipt MM / DD / YYYY 07 / 14 / 2016
Mailing Address 2553 TRES LAGOS		Transaction ID : SA11A.347317
City ALAMOGORDO	State NM	Zip Code 88310-7764
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	1275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2620 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIMBER, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 TRES LAGOS
 City ALAMOGORDO State NM Zip Code 88310-7764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354542
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KIMBER, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 TRES LAGOS
 City ALAMOGORDO State NM Zip Code 88310-7764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.380011
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KIMBER, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 TRES LAGOS
 City ALAMOGORDO State NM Zip Code 88310-7764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408706
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2621 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KIMBELL, JEFFREY, , ,		Date of Receipt MM / DD / YYYY 08 / 22 / 2016 Transaction ID : SA11A.375663
Mailing Address 601 13TH STREET NW SUITE 650 N		Amount of Each Receipt this Period 2500.00
City WASHINGTON	State DC	Zip Code 20005-3807
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LOBBYIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KIMERLING, JONATHAN, , ,		Date of Receipt MM / DD / YYYY 07 / 28 / 2016 Transaction ID : SA11A.357416
Mailing Address 2968 CHEROKEE ROAD		Amount of Each Receipt this Period 5000.00
City BIRMINGHAM	State AL	Zip Code 35223-2609
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INVERNESS HOLDINGS, LLC	Occupation (for Individual) EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KIMMELMAN, DOUGLAS, , ,		Date of Receipt MM / DD / YYYY 07 / 15 / 2016 Transaction ID : SA11A.348120
Mailing Address 130 OVERLEIGH RD		Amount of Each Receipt this Period 75000.00
City BERNARDSVILLE	State NJ	Zip Code 07924-1519
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ENERGY CAPITAL PARTNERS	Occupation (for Individual) INVESTMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 75000.00	

SUBTOTAL of Receipts This Page (optional).....▶	82500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2622 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KIMMICH, SHIRLEY, , ,

Mailing Address 4175 EXECUTIVE DR.
UNIT G104

City LA JOLLA State CA Zip Code 92037-1370

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.349438

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KIMMICH, SHIRLEY, , ,

Mailing Address 4175 EXECUTIVE DR.
UNIT G104

City LA JOLLA State CA Zip Code 92037-1370

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.394395

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KIMMICH, SHIRLEY, , ,

Mailing Address 4175 EXECUTIVE DR.
UNIT G104

City LA JOLLA State CA Zip Code 92037-1370

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2016

Transaction ID : SA11A.411017

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2623 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIMMICH, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4175 EXECUTIVE DR.
 UNIT G104
 City LA JOLLA State CA Zip Code 92037-1370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KINEEN, JAMES, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 N 101ST STREET
 City OMAHA State NE Zip Code 68114-1268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390808
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KING, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 KNIGHT AVENUE
 City SEQUIM State WA Zip Code 98382-8102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378557
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2624 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7379 ALICANTE ROAD
 City CARLSBAD State CA Zip Code 92009-6261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414484
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.358454
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366722
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2625 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368876
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396800
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398676
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2626 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, HANNAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420058
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KING, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2746 SKY HORSE TRL
 City RENO State NV Zip Code 89511-5373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391874
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KING, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2746 SKY HORSE TRL
 City RENO State NV Zip Code 89511-5373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402788
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2627 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8696 HALE ROAD
 City MANLIUS State NY Zip Code 13104-8781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401163
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KING, WILLIAM, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 634 S DAISY AVENUE
 City SANTA ANA State CA Zip Code 92703-4211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMMSSION SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377687
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KINGRY, ANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 16TH ST NE
 City SALEM State OR Zip Code 97301-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379838
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2628 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KINGRY, ANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 16TH ST NE
 City SALEM State OR Zip Code 97301-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403005
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KINGRY, ANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 16TH ST NE
 City SALEM State OR Zip Code 97301-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420108
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KINGSBURY, PAUL, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 859
 City CRESTED BUTTE State CO Zip Code 81224-0859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355339
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2629 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KINGSBURY, PAUL, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 859
 City CRESTED BUTTE State CO Zip Code 81224-0859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372502
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KINGSBURY, PAUL, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 859
 City CRESTED BUTTE State CO Zip Code 81224-0859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382396
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KINKELA, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 MYRTLE AVENUE
 City KEYPORT State NJ Zip Code 07735-1711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAYSHORE SERVICES, INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372871
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2630 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KINKELA, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 MYRTLE AVENUE
 City KEYPORT State NJ Zip Code 07735-1711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DREXEL UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372844
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KINZER, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7514 CARUTH BLVD
 City DALLAS State TX Zip Code 75225-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357698
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KINZER, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7514 CARUTH BLVD
 City DALLAS State TX Zip Code 75225-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357699
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2631 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KINZER, LORETTA, , ,			Date of Receipt
Mailing Address 7514 CARUTH BLVD			<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City DALLAS	State TX	Zip Code 75225-4505	Transaction ID : SA11A.382795
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="700.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KINZER, LORETTA, , ,			Date of Receipt
Mailing Address 7514 CARUTH BLVD			<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2016"/>
City DALLAS	State TX	Zip Code 75225-4505	Transaction ID : SA11A.396741
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="700.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KINZER, LORETTA, , ,			Date of Receipt
Mailing Address 7514 CARUTH BLVD			<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2016"/>
City DALLAS	State TX	Zip Code 75225-4505	Transaction ID : SA11A.396744
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="700.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2632 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KINZER, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7514 CARUTH BLVD
 City DALLAS State TX Zip Code 75225-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413028
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KINZEL, WILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 NEW YORK AVE NW STE 200 STE 200
 City WASHINGTON State DC Zip Code 20005-6609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANAGING DIRECTOR Occupation (for Individual) DELTA AIR LINES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407160
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. KIPFER, BRIDGET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 BUNN AVENUE
 City ZEBULON State NC Zip Code 27597-5866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RELATIONOMICS LLC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392230
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2633 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIPFER, BRIDGET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 BUNN AVENUE
 City ZEBULON State NC Zip Code 27597-5866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RELATIONOMICS LLC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419225
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353449
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370668
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2634 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387260
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387263
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398939
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2635 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398940
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421948
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KIRCHER, MARIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 S DADELAND BLVD
 SUITE 908
 City MIAMI State FL Zip Code 33156-7841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRCHER LAW, P.A. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421950
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2636 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRK, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 4TH ST. W #5644
 City KETCHUM State ID Zip Code 83340-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376093
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KIRK, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 4TH ST. W #5644
 City KETCHUM State ID Zip Code 83340-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383937
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KIRK, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 4TH ST. W #5644
 City KETCHUM State ID Zip Code 83340-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391865
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2637 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KIRK, RUSSELL, , ,		Date of Receipt MM / DD / YYYY 09 / 23 / 2016
Mailing Address 151 4TH ST. W #5644		Transaction ID : SA11A.405268
City KETCHUM	State ID FL	Zip Code 83340-7428
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KIRKLEY, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 08 / 04 / 2016
Mailing Address 1111 SE 12TH WAY		Transaction ID : SA11A.360983
City FORT LAUDERDALE	State ID FL	Zip Code 33316-1352
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KIRKLEY, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016
Mailing Address 1111 SE 12TH WAY		Transaction ID : SA11A.406915
City FORT LAUDERDALE	State ID FL	Zip Code 33316-1352
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2638 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRSCH, GEOFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 285 LITTLE ANDORRA ROAD

City EDWARDS	State CO	Zip Code 81632-6256
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416958

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. KIRSCH, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3250 STEIN STREET

City MOBILE	State AL	Zip Code 36608-5815
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TECHANAX	Occupation (for Individual) PROGRAM MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352374

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KIRSCH, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3250 STEIN STREET

City MOBILE	State AL	Zip Code 36608-5815
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TECHANAX	Occupation (for Individual) PROGRAM MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369915

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2639 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRSCH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3250 STEIN STREET
 City MOBILE State AL Zip Code 36608-5815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHANAX Occupation (for Individual) PROGRAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397745
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KIRSCH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3250 STEIN STREET
 City MOBILE State AL Zip Code 36608-5815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHANAX Occupation (for Individual) PROGRAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402304
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348651
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2640 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357684
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359957
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366716
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	331.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2641 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374300
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384815
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410553
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	331.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2642 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418791
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1386.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419637
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. KIRWAN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476-6012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347475
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	331.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2643 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRWAN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476-6012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405711
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. KIRWAN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476-6012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405724
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. KIRWAN, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476-6012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405729
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2644 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KIRWAN, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 GROVE STREET

City SONOMA	State CA	Zip Code 95476-6012
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405730

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KITRELL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 976 MEADOW LANE

City HENDERSON	State NC	Zip Code 27536-3853
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.371178

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. KITTLE, JEFFREY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10445 HIGH GROVE DR.

City CARMEL	State IN	Zip Code 46032-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HERMAN & KITTLE PROPERTIES	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.395815

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2645 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KJOS, MONTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3102 26TH AVENUE S
 City FARGO State ND Zip Code 58103-5067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.393871
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KLAUDER, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 476
 City BOYERTOWN State PA Zip Code 19512-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357816
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. KLAUDER, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 476
 City BOYERTOWN State PA Zip Code 19512-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369386
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 510.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2646 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLAUDER, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 476
 City BOYERTOWN State PA Zip Code 19512-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377751
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. KLAUDER, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 476
 City BOYERTOWN State PA Zip Code 19512-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381521
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. KLAUDER, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 476
 City BOYERTOWN State PA Zip Code 19512-0476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.406461
 Amount of Each Receipt this Period 2.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2647 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLAUER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2020 S. GRANDVIEW AVE.

City DUBUQUE	State IA	Zip Code 52003-7923
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAUER MFG. CO.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353631

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KLAUER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2020 S. GRANDVIEW AVE.

City DUBUQUE	State IA	Zip Code 52003-7923
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAUER MFG. CO.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354480

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KLAUER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2020 S. GRANDVIEW AVE.

City DUBUQUE	State IA	Zip Code 52003-7923
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAUER MFG. CO.	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379989

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2648 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLAUER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 S. GRANDVIEW AVE.
 City DUBUQUE State IA Zip Code 52003-7923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KLAUER MFG. CO. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403885
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KLEBBA, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5457 RIVER RIDGE DR
 City BRIGHTON State MI Zip Code 48116-7791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347333
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KLEBBA, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5457 RIVER RIDGE DR
 City BRIGHTON State MI Zip Code 48116-7791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374805
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2649 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEBBA, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5457 RIVER RIDGE DR
 City BRIGHTON State MI Zip Code 48116-7791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387024
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLEBBA, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5457 RIVER RIDGE DR
 City BRIGHTON State MI Zip Code 48116-7791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387025
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368506
 Amount of Each Receipt this Period 2.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 202.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2650 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372238
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372246
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383730
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2651 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397998
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410062
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KLEBER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 E. NEW HOPE RD
 City GOLDSBORO State NC Zip Code 27534-7005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422550
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2652 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEEMAN, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7996 OAK CREEK DR
 City RENO State NV Zip Code 89511-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372930
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KLEEMAN, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7996 OAK CREEK DR
 City RENO State NV Zip Code 89511-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KLEEMAN, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7996 OAK CREEK DR
 City RENO State NV Zip Code 89511-1065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409864
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2653 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIBER, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 943 150TH
City HILLSBORO State KS Zip Code 67063-8050
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) AG SERVICE INC Occupation (for Individual) ACCOUNTING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381777
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KLEIN, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 303 TROENDLE STREET SW, APT 159
City MAPLETON State MN Zip Code 56065-9701
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356544
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KLEIN, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 303 TROENDLE STREET SW, APT 159
City MAPLETON State MN Zip Code 56065-9701
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 335.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356545
Amount of Each Receipt this Period 135.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 835.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2654 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 MADISON AVE
 City NEW YORK State NY Zip Code 10022-4214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARK TOWER GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.361547
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

B. KLEIN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BEETHOVEN AVE
 City WABAN State MA Zip Code 02468-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VARIOUS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418180
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. KLEIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4207 PALOMINO COURT
 City MIDDLETOWN State MD Zip Code 21769-6639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KLAS Occupation (for Individual) EMPLOYEE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354501
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 105100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2655 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4207 PALOMINO COURT

City MIDDLETOWN	State MD	Zip Code 21769-6639
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAS	Occupation (for Individual) EMPLOYEE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380015

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KLEIN, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4207 PALOMINO COURT

City MIDDLETOWN	State MD	Zip Code 21769-6639
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KLAS	Occupation (for Individual) EMPLOYEE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408689

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KLEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 WATCHWATER WAY

City ROCKVILLE	State MD	Zip Code 20850-2742
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MID-ATLANTIC EPILEPSY AND SLEEP	Occupation (for Individual) 4006791202
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
237.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406302

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2656 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, SYLVIA, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21139 ARBOR COURT
 City LEONARDTOWN State MD Zip Code 20650-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347744
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. KLEIN, SYLVIA, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21139 ARBOR COURT
 City LEONARDTOWN State MD Zip Code 20650-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354979
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. KLEIN, SYLVIA, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21139 ARBOR COURT
 City LEONARDTOWN State MD Zip Code 20650-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364467
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2657 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEIN, SYLVIA, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21139 ARBOR COURT
 City LEONARDTOWN State MD Zip Code 20650-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378244
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. KLEIN, SYLVIA, K., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21139 ARBOR COURT
 City LEONARDTOWN State MD Zip Code 20650-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414657
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. KLEISER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1855 CENTER RD
 City NOVATO State CA Zip Code 94947-2976
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349508
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2658 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KLEISER, JAMES, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016 Transaction ID : SA11A.372960
Mailing Address 1855 CENTER RD		Amount of Each Receipt this Period 50.00
City NOVATO	State CA	Zip Code 94947-2976
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KLEISER, JAMES, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016 Transaction ID : SA11A.387310
Mailing Address 1855 CENTER RD		Amount of Each Receipt this Period 50.00
City NOVATO	State CA	Zip Code 94947-2976
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KLEISER, JAMES, , ,		Date of Receipt MM / DD / YYYY 09 / 13 / 2016 Transaction ID : SA11A.394386
Mailing Address 1855 CENTER RD		Amount of Each Receipt this Period 100.00
City NOVATO	State CA	Zip Code 94947-2976
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2659 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLEISER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1855 CENTER RD
 City NOVATO State CA Zip Code 94947-2976
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403087
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLETZING, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1845 GREEN ST., APT 207
 City SAN FRANCISCO State CA Zip Code 94123-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FACEBOOK Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.369185
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KLETZING, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1845 GREEN ST., APT 207
 City SAN FRANCISCO State CA Zip Code 94123-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FACEBOOK Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384597
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2660 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLETZING, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1845 GREEN ST., APT 207
 City SAN FRANCISCO State CA Zip Code 94123-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FACEBOOK Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411678
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLINE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 JOHNSON AVE
 City LOUISVILLE State CO Zip Code 80027-1918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406168
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KLINE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 JOHNSON AVE
 City LOUISVILLE State CO Zip Code 80027-1918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406170
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2661 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLINE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 726 HEDGEROW DR
 City BROOMALL State PA Zip Code 19008-2730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368260
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KLINE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 726 HEDGEROW DR
 City BROOMALL State PA Zip Code 19008-2730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380424
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KLINE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 726 HEDGEROW DR
 City BROOMALL State PA Zip Code 19008-2730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410230
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2662 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLINE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 726 HEDGEROW DR
 City BROOMALL State PA Zip Code 19008-2730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410233
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLINGE, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 ASPEN WAY NORTH. P.
 City BASYE State VA Zip Code 22810-0352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404794
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KLINGHER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 GODFREY ROAD
 City WESTON State CT Zip Code 06883-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTBRIDGE CAPITAL Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372666
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2663 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KLISE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 GREENS VIEW DRIVE
 City WOOSTER State OH Zip Code 44691-2660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361346
 Amount of Each Receipt this Period
 360.00
 Memo Item
 CONTRIBUTION

B. KLISE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 GREENS VIEW DRIVE
 City WOOSTER State OH Zip Code 44691-2660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389517
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. KLISE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 GREENS VIEW DRIVE
 City WOOSTER State OH Zip Code 44691-2660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.395861
 Amount of Each Receipt this Period
 280.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	790.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2664 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KLOTS, TIMOTHY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 22
 City WYANDOTTE State MI Zip Code 48192-0022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASF Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLOTS, TIMOTHY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 22
 City WYANDOTTE State MI Zip Code 48192-0022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASF Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401342
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL CT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349132
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2665 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL CT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360207
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

B. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL CT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.369188
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL CT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.369189
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2666 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL CT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374757
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL CT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399735
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KLUCK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8650 INDIAN HILL CT
 City ORANGEVALE State CA Zip Code 95662-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY FIRST HOME IMPROVEMENT INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411182
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2667 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUESENDORF, BOB, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6112 LYONS RD
 City BURLINGTON State WI Zip Code 53105-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349721
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KLUESENDORF, BOB, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6112 LYONS RD
 City BURLINGTON State WI Zip Code 53105-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358030
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KLUESENDORF, BOB, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N6112 LYONS RD
 City BURLINGTON State WI Zip Code 53105-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370529
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2668 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUESENDORF, BOB, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address N6112 LYONS RD

City BURLINGTON	State WI	Zip Code 53105-2716
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016
Transaction ID : SA11A.379962

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. KLUESENDORF, BOB, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address N6112 LYONS RD

City BURLINGTON	State WI	Zip Code 53105-2716
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016
Transaction ID : SA11A.386818

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KLUESENDORF, BOB, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address N6112 LYONS RD

City BURLINGTON	State WI	Zip Code 53105-2716
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 410.00	

Date of Receipt
MM / DD / YYYY
09 / 15 / 2016
Transaction ID : SA11A.398298

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2669 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUMP, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 158 RANCH TRAIL
 City WILLIAMSVILLE State NY Zip Code 14221-2439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANISIUS COLLEGE Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KLUZNIK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 PARK AVENUE
 City WHITE BEAR TOWNSHI State MN Zip Code 55110-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387521
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KLUZNIK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 PARK AVENUE
 City WHITE BEAR TOWNSHI State MN Zip Code 55110-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 03 / 2016
Transaction ID : SA11A.389214
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2670 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLUZNIK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 PARK AVENUE
 City WHITE BEAR TOWNSHI State MN Zip Code 55110-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.400351
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLUZNIK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 PARK AVENUE
 City WHITE BEAR TOWNSHI State MN Zip Code 55110-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.400353
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KMETZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 TOWNE LANE
 City TOPSFIELD State MA Zip Code 01983-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KMETZ MANAGEMENT CONSULTING LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379855
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2671 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KMETZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 TOWNE LANE
 City TOPSFIELD State MA Zip Code 01983-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KMETZ MANAGEMENT CONSULTING LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398387
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. KMETZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 TOWNE LANE
 City TOPSFIELD State MA Zip Code 01983-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KMETZ MANAGEMENT CONSULTING LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410412
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. KNAPP, PETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4312 E 2ND STREET APT E
 City LONG BEACH State CA Zip Code 90803-5364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365279
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2672 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNAUSS, DALTON, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 S DECISION PINE
 City PAYSON State AZ Zip Code 85541-5890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364293
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KNIGHT, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 580 EASTWOOD ROAD
 City HINCKLEY State OH Zip Code 44233-9496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357885
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KNIGHT, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 580 EASTWOOD ROAD
 City HINCKLEY State OH Zip Code 44233-9496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387755
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2673 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337

City ROSICLARE	State IL	Zip Code 62982-0337
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380773

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337

City ROSICLARE	State IL	Zip Code 62982-0337
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407953

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KNIGHT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337

City ROSICLARE	State IL	Zip Code 62982-0337
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410881

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2674 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349651
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352351
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355757
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2675 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KNIGHT, MITZI, , ,		Date of Receipt MM / DD / YYYY 08 / 05 / 2016
Mailing Address PO BOX 337		Transaction ID : SA11A.363054
City ROSICLARE	State IL	Zip Code 62982-0337
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1825.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KNIGHT, MITZI, , ,		Date of Receipt MM / DD / YYYY 08 / 11 / 2016
Mailing Address PO BOX 337		Transaction ID : SA11A.365067
City ROSICLARE	State IL	Zip Code 62982-0337
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1825.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KNIGHT, MITZI, , ,		Date of Receipt MM / DD / YYYY 08 / 16 / 2016
Mailing Address PO BOX 337		Transaction ID : SA11A.368693
City ROSICLARE	State IL	Zip Code 62982-0337
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1825.00	

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2676 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1825.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.375020
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1825.00

Date of Receipt
 08 / 21 / 2016
Transaction ID : SA11A.375871
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1825.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381785
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2677 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337

City ROSICLARE	State IL	Zip Code 62982-0337
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016

Transaction ID : SA11A.389117

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337

City ROSICLARE	State IL	Zip Code 62982-0337
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2016

Transaction ID : SA11A.393696

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337

City ROSICLARE	State IL	Zip Code 62982-0337
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11A.398718

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2678 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401439
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KNIGHT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 VISTA DE LA MESA
 City SANTA BARBARA State CA Zip Code 93110-2000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KNIGHT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1080 VISTA DE LA MESA
 City SANTA BARBARA State CA Zip Code 93110-2000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422844
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2679 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KNOBLOCH, CARL, W., , JR.

Mailing Address **PO BOX 1530**

City **WILSON** State **WY** Zip Code **83014-1530**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11A.391358

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KNOTT, KATHARINE, C., ,

Mailing Address **485 UNDERHILL BLVD**

City **SYOSSET** State **NY** Zip Code **11791-3434**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11A.391356

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KNOWLES, TRUE, H., ,

Mailing Address **3831 TURTLE CREEK BOULEVARD, APT 2**

City **DALLAS** State **TX** Zip Code **75219-4538**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **INVESTOR**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11A.356596

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **13500.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2680 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347868
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354103
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364404
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2681 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401143
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. KNOX, DORIS, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23144 S SHORE DRIVE
 City EDWARDSBURG State MI Zip Code 49112-8502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414652
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. KNOX, WILLIAM, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 657 SEITZ DR
 City SALINA State KS Zip Code 67401-3773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357394
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2682 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KNOX, WILLIAM, P., ,

Mailing Address 657 SEITZ DR

City SALINA	State KS	Zip Code 67401-3773
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.363180

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KNOX, WILLIAM, P., ,

Mailing Address 657 SEITZ DR

City SALINA	State KS	Zip Code 67401-3773
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383635

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KNOX, WILLIAM, P., ,

Mailing Address 657 SEITZ DR

City SALINA	State KS	Zip Code 67401-3773
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397705

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2683 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KNOX, WILLIAM, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 657 SEITZ DR
 City SALINA State KS Zip Code 67401-3773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398085
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KNUDSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 WINDSWEPT DR
 City ST. GEORGE State UT Zip Code 84790-4483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.383540
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KNUDSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 WINDSWEPT DR
 City ST. GEORGE State UT Zip Code 84790-4483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385522
 Amount of Each Receipt this Period
 1.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	151.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2684 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNUDSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 WINDSWEPT DR
 City ST. GEORGE State UT Zip Code 84790-4483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403720
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KNUDSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 WINDSWEPT DR
 City ST. GEORGE State UT Zip Code 84790-4483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403784
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KNUPP, CLYDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 NORTH 11TH STREET
 City FORT DODGE State IA Zip Code 50501-7023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372487
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2685 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNUPP, CLYDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 NORTH 11TH STREET
 City FORT DODGE State IA Zip Code 50501-7023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372492
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KNUST, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY NO. 450
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROMACHINE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418555
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KNUST, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY NO. 450
 City HOUSTON State TX Zip Code 77057-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROMACHINE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418573
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2686 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNUST, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5773 WOODWAY NO. 450

City HOUSTON	State TX	Zip Code 77057-1501
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROMACHINE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418574

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. KOBELT, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 62 SYCAMORE WOODS LANE

City TIFFIN	State OH	Zip Code 44883-3814
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) W. C. FELTON AGENCY, INC.	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349673

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. KOBELT, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 62 SYCAMORE WOODS LANE

City TIFFIN	State OH	Zip Code 44883-3814
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) W. C. FELTON AGENCY, INC.	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390271

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2687 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOBELT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 SYCAMORE WOODS LANE
 City TIFFIN State OH Zip Code 44883-3814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 W. C. FELTON AGENCY, INC. INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392931
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KOBELT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 SYCAMORE WOODS LANE
 City TIFFIN State OH Zip Code 44883-3814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 W. C. FELTON AGENCY, INC. INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403869
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KOBELT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 SYCAMORE WOODS LANE
 City TIFFIN State OH Zip Code 44883-3814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 W. C. FELTON AGENCY, INC. INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403870
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2688 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOCH, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6295 DONEGAN WAY
 City DUBLIN State OH Zip Code 43016-6172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374168
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. KOCH, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6295 DONEGAN WAY
 City DUBLIN State OH Zip Code 43016-6172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398587
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. KOCH, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6295 DONEGAN WAY
 City DUBLIN State OH Zip Code 43016-6172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409902
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2689 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOCH, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 DELAWARE AVE
 City BUFFALO State NY Zip Code 14202-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW ERA CAP COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385239
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

B. KOCH, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1369 TOWER RD
 City WINNETKA State IL Zip Code 60093-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362300
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. KOCH, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1369 TOWER RD
 City WINNETKA State IL Zip Code 60093-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372633
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2690 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOCH, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1369 TOWER RD

City WINNETKA	State IL	Zip Code 60093-1626
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378696

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KOCHER, BRYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1515 S ARLINGTON RIDGE ROAD
UNIT 604

City ARLINGTON	State VA	Zip Code 22202-1972
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.360988

Amount of Each Receipt this Period
101.00

Memo Item CONTRIBUTION

C. KOCHER, BRYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1515 S ARLINGTON RIDGE ROAD
UNIT 604

City ARLINGTON	State VA	Zip Code 22202-1972
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.378479

Amount of Each Receipt this Period
101.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	302.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2691 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOCUR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5156 E OTERO CIR
 City CENTENNIAL State CO Zip Code 80122-3880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349268
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. KOCUR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5156 E OTERO CIR
 City CENTENNIAL State CO Zip Code 80122-3880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349275
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KOCUR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5156 E OTERO CIR
 City CENTENNIAL State CO Zip Code 80122-3880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHS-DENVER Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374664
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2692 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOCUR, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5156 E OTERO CIR

City CENTENNIAL	State CO	Zip Code 80122-3880
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHS-DENVER	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388496

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. KOCUR, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5156 E OTERO CIR

City CENTENNIAL	State CO	Zip Code 80122-3880
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHS-DENVER	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399611

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KOEHLER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3012 WOODSONG LANE

City CLEARWATER	State FL	Zip Code 33761-2021
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JK BRYAN LANE INVESTMENTS	Occupation (for Individual) MANAGING MEMBER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352330

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2693 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOEHLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 WOODSONG LANE
 City CLEARWATER State FL Zip Code 33761-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK BRYAN LANE INVESTMENTS Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375875
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KOEHLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 WOODSONG LANE
 City CLEARWATER State FL Zip Code 33761-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK BRYAN LANE INVESTMENTS Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390259
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KOEHLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 WOODSONG LANE
 City CLEARWATER State FL Zip Code 33761-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK BRYAN LANE INVESTMENTS Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390273
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2694 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOEHLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 WOODSONG LANE
 City CLEARWATER State FL Zip Code 33761-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK BRYAN LANE INVESTMENTS Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394069
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KOEHLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 WOODSONG LANE
 City CLEARWATER State FL Zip Code 33761-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK BRYAN LANE INVESTMENTS Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401475
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KOEHLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 WOODSONG LANE
 City CLEARWATER State FL Zip Code 33761-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK BRYAN LANE INVESTMENTS Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409900
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2695 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KOEHLER, JOHN, , ,

Mailing Address **3012 WOODSONG LANE**

City **CLEARWATER** State **FL** Zip Code **33761-2021**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **JK BRYAN LANE INVESTMENTS** Occupation (for Individual) **MANAGING MEMBER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
09 / 27 / 2016
Transaction ID : SA11A.409901

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KOELSCH, AARON, , ,

Mailing Address **4904 KEATING ROAD NW**

City **OLYMPIA** State **WA** Zip Code **98502-9535**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KOELSCH SENIOR COMMUNITIES** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
08 / 09 / 2016
Transaction ID : SA11A.361549

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KOENINGS, ANTHONY, G., MR.,

Mailing Address **1360 WEST BUELL ROAD**

City **OAKLAND** State **MI** Zip Code **48363-2326**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
08 / 18 / 2016
Transaction ID : SA11A.371372

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **1300.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2696 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOERNER, THOMAS, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 WAKEFIELD VILLAGE BOULEVARD
 City KENDALLVILLE State IN Zip Code 46755-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360283
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KOERNER, THOMAS, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 WAKEFIELD VILLAGE BOULEVARD
 City KENDALLVILLE State IN Zip Code 46755-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370948
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KOERNER, THOMAS, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 WAKEFIELD VILLAGE BOULEVARD
 City KENDALLVILLE State IN Zip Code 46755-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406856
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2697 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH STREET
 STE 1074
 City FORT LAUDERDALE State FL Zip Code 33316-2960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348229
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH STREET
 STE 1074
 City FORT LAUDERDALE State FL Zip Code 33316-2960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.401600
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH STREET
 STE 1074
 City FORT LAUDERDALE State FL Zip Code 33316-2960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.401601
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2698 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOLLMORGEN, MARILYN, R., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4400 161ST STREET

City URBANDALE	State IA	Zip Code 50323-2419
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381544

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. KOLOVOS, GEORGE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12424 WILSHIRE BOULEVARD, SUITE 10

City LOS ANGELES	State CA	Zip Code 90025-1071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HAC	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11A.389054

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KOLOVOS, GEORGE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12424 WILSHIRE BOULEVARD, SUITE 10

City LOS ANGELES	State CA	Zip Code 90025-1071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HAC	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.391624

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2699 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOLTON, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1116 SOUTH VINE

City PARK RIDGE	State IL	Zip Code 60068-4824
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.401603

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. KOMITEE, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 MONTAGUE TER.

City BROOKLYN	State NY	Zip Code 11201-4105
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIKING GLOBAL INVESTORS LP	Occupation (for Individual) ATTY
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2016

Transaction ID : SA11A.392012

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. KONZE, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7318 RIVERHILL ROAD

City OXON HILL	State MD	Zip Code 20745-1031
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016

Transaction ID : SA11A.366074

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2700 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOOI, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 741 WATERFORD DRIVE

City CHICO	State CA	Zip Code 95973-0451
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 03 / 2016
Transaction ID : SA11A.362599

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KOOI, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 741 WATERFORD DRIVE

City CHICO	State CA	Zip Code 95973-0451
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 26 / 2016
Transaction ID : SA11A.380364

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. KOOI, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 741 WATERFORD DRIVE

City CHICO	State CA	Zip Code 95973-0451
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 26 / 2016
Transaction ID : SA11A.380367

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2701 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOOI, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 741 WATERFORD DRIVE
 City CHICO State CA Zip Code 95973-0451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403578
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KOOI, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 741 WATERFORD DRIVE
 City CHICO State CA Zip Code 95973-0451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403603
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KOONTZ, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 CEDARFIELD LANE
 City HENRICO State VA Zip Code 23233-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.380961
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2702 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOPEC, MICHAEL, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 OTTER CREEK ROAD
 City SKILLMAN State NJ Zip Code 08558-2364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365239
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KOPPER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3845 HILL CIR
 City COLORADO SPRINGS State CO Zip Code 80904-1188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W BRUCE KOPPER INVESTMENT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381568
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. KORBELL, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 PARK HILL DRIVE
 City SAN ANTONIO State TX Zip Code 78212-2512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379416
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2703 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KORN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13567 MANGO DRIVE
 City DEL MAR State CA Zip Code 92014-3538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366272
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KOSANN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 EAST 58TH STREET 34H
 City NEW YORK State NY Zip Code 10022-2300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARNET PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350637
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KOSANN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 EAST 58TH STREET 34H
 City NEW YORK State NY Zip Code 10022-2300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARNET PRODUCTS CORP. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414317
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 3000.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2704 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KOSLOSKY, MICHAEL, , ,

Mailing Address **PO BOX 181**

City **NEBRASKA CITY** State **NE** Zip Code **68410-0181**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MAGNOLIA METAL CORP.** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **08 / 16 / 2016**

Transaction ID : SA11A.368268

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KOSLOSKY, MICHAEL, , ,

Mailing Address **PO BOX 181**

City **NEBRASKA CITY** State **NE** Zip Code **68410-0181**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MAGNOLIA METAL CORP.** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 27 / 2016**

Transaction ID : SA11A.410356

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KOSTERS, ROBERT, D., ,

Mailing Address **42759 MOUNTAIN SHADOW ROAD**

City **MURRIETA** State **CA** Zip Code **92562-3312**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **TAX CONSULTANT**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 26 / 2016**

Transaction ID : SA11A.406889

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **750.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2705 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOTHARI, RAJNIKANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1758 MUIR FIELD AVE, NW
 City CANTON State OH Zip Code 44708-1972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422720
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KOTHE, TERENCE, L. , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 LE GRANDE BOULEVARD
 City AURORA State IL Zip Code 60506-4843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRUST COMPANY OF IL Occupation (for Individual) WEALTH MANAGEMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406890
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KOTICK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21600 OXNARD ST STE 1200 STE 1200
 City WOODLAND HILLS State CA Zip Code 91367-4949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIANT CAPITAL Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395814
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2706 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOTLOFF, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26600 OSO PKWY
 436
 City MISSION VIEJO State CA Zip Code 92691-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 389.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400020
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KOTLOFF, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26600 OSO PKWY
 436
 City MISSION VIEJO State CA Zip Code 92691-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 389.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403003
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KOTLOFF, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26600 OSO PKWY
 436
 City MISSION VIEJO State CA Zip Code 92691-5652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 389.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418300
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2707 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRALL, NOREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14725 AMBERWOOD LANE
 City MORGAN HILL State CA Zip Code 95037-5902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLE INC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360139
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. KRAMER, REX, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 WEMBLEY CT
 City COLORADO SPRINGS State CO Zip Code 80906-4809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349234
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KRAMER, REX, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 WEMBLEY CT
 City COLORADO SPRINGS State CO Zip Code 80906-4809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.388005
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2708 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22536 W 112TH TER
 City OLATHE State KS Zip Code 66061-7142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357583
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRAMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22536 W 112TH TER
 City OLATHE State KS Zip Code 66061-7142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382807
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRAMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22536 W 112TH TER
 City OLATHE State KS Zip Code 66061-7142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.399042
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2709 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22536 W 112TH TER
 City OLATHE State KS Zip Code 66061-7142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399043
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRAMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22536 W 112TH TER
 City OLATHE State KS Zip Code 66061-7142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413035
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRAMER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2626 HOWELL STREET FL 10
 City DALLAS State TX Zip Code 75204-4064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REPUBLIC TITLE OF TX Occupation (for Individual) TITLE INSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366071
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2710 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRANE, HILARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4636 SW HUMPHREY CT
 City PORTLAND State OR Zip Code 97221-2325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE, INC. Occupation (for Individual) EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.348118
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. KRAPF, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17211 FAWN COVE
 City SAN ANTONIO State TX Zip Code 78248-1583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.360264
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. KRAPF, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 HUNTING HILL LANE
 City WEST CHESTER State PA Zip Code 19382-2355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KRAPF BUS COMPANIES Occupation (for Individual) CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368302
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2711 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAPF, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 HUNTING HILL LANE
 City WEST CHESTER State PA Zip Code 19382-2355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KRAPF BUS COMPANIES Occupation (for Individual) CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381386
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KRAUSE, DARRYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 VISTA REAL
 City MILL VALLEY State CA Zip Code 94941-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTAE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362184
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KRAUS, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6502 W OCEAN FRONT
 City NEWPORT BEACH State CA Zip Code 92663-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KRAUS CONSTRUCTION INC Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.388017
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2712 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUS, GENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6502 W OCEAN FRONT

City NEWPORT BEACH	State CA	Zip Code 92663-1825
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KRAUS CONSTRUCTION INC	Occupation (for Individual) GENERAL CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415747

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KRAUS, GENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6502 W OCEAN FRONT

City NEWPORT BEACH	State CA	Zip Code 92663-1825
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KRAUS CONSTRUCTION INC	Occupation (for Individual) GENERAL CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415771

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 N HERKIMER ST

City JOLIET	State IL	Zip Code 60432-1057
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
635.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352064

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2713 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354518
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375984
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt **08 / 20 / 2016**
Transaction ID : SA11A.376012
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2714 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KRAUSE, PAUL, , MR.,		Date of Receipt MM / DD / YYYY 08 / 20 / 2016
Mailing Address 1301 N HERKIMER ST		Transaction ID : SA11A.376013
City JOLIET	State IL	Zip Code 60432-1057
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KRAUSE, PAUL, , MR.,		Date of Receipt MM / DD / YYYY 09 / 07 / 2016
Mailing Address 1301 N HERKIMER ST		Transaction ID : SA11A.390888
City JOLIET	State IL	Zip Code 60432-1057
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KRAUSE, PAUL, , MR.,		Date of Receipt MM / DD / YYYY 09 / 07 / 2016
Mailing Address 1301 N HERKIMER ST		Transaction ID : SA11A.390889
City JOLIET	State IL	Zip Code 60432-1057
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTO DISMANTLER/REESTATE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 635.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2715 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.393826
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400741
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401530
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2716 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSE, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 N HERKIMER ST
 City JOLIET State IL Zip Code 60432-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DISMANTLER/REESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404570
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KRAVIS, MARIE-JOSEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 PARK AVE
 City NEW YORK State NY Zip Code 10065-6545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KOHLBERG KRAVIS ROBERTS & CO. Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.375446
 Amount of Each Receipt this Period 7700.00
 Memo Item CONTRIBUTION

C. KREAGER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1620 43RD AVE E #16-C
 City SEATTLE State WA Zip Code 98112-3293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386078
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2717 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KREIDLER, ROBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 6464
 City CINCINNATI State OH Zip Code 45201-6464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.347758
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KREIDER, S., M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 PARK PLACE
 City BETHLEHEM State PA Zip Code 18017-2467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.401770
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KREITER, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 FOREST ROAD
 City DAVENPORT State IA Zip Code 52803-2342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387663
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2718 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KREYENHAGEN, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15827 BEAVER RUN RD
 City CANYON COUNTRY State CA Zip Code 91387-4004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348549
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KREYENHAGEN, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15827 BEAVER RUN RD
 City CANYON COUNTRY State CA Zip Code 91387-4004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403486
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KREYENHAGEN, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15827 BEAVER RUN RD
 City CANYON COUNTRY State CA Zip Code 91387-4004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403490
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2719 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRICK, EDWIN, H., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2113

City REDLANDS	State CA	Zip Code 92373-0681
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11A.355552

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. KRICK, EDWIN, H., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2113

City REDLANDS	State CA	Zip Code 92373-0681
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11A.384990

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KRICK, EDWIN, H., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2113

City REDLANDS	State CA	Zip Code 92373-0681
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11A.399337

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2720 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRICK, EDWIN, H., DR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 2113

City REDLANDS	State CA	Zip Code 92373-0681
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401181

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KRICK, EDWIN, H., DR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 2113

City REDLANDS	State CA	Zip Code 92373-0681
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405115

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. KRICK, EDWIN, H., DR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 2113

City REDLANDS	State CA	Zip Code 92373-0681
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405130

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2721 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRICK, EDWIN, H., DR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 2113

City REDLANDS	State CA	Zip Code 92373-0681
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411493

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. KRINGEL, ANGELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 932 SOUTH PINE CREEK TD

City FAIRFIELD	State CT	Zip Code 06824-6348
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11A.346945

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. KRINGEL, ANGELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 932 SOUTH PINE CREEK TD

City FAIRFIELD	State CT	Zip Code 06824-6348
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358297

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2722 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK TD
 City FAIRFIELD State CT Zip Code 06824-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386115
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK TD
 City FAIRFIELD State CT Zip Code 06824-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386116
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK TD
 City FAIRFIELD State CT Zip Code 06824-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386121
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2723 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK TD
 City FAIRFIELD State CT Zip Code 06824-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386124
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRINGEL, ANGELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 SOUTH PINE CREEK TD
 City FAIRFIELD State CT Zip Code 06824-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414872
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRISHNAN, SUREKHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10112 PARKWOOD TER
 City BETHESDA State MD Zip Code 20814-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDIMMUNE, LLC Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375790
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2724 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRISHNAN, SUREKHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10112 PARKWOOD TER
 City BETHESDA State MD Zip Code 20814-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDIMMUNE, LLC Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375791
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KRISHNAN, SUREKHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10112 PARKWOOD TER
 City BETHESDA State MD Zip Code 20814-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDIMMUNE, LLC Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400087
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KRISHNAN, SUREKHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10112 PARKWOOD TER
 City BETHESDA State MD Zip Code 20814-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDIMMUNE, LLC Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400088
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2725 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRISHNAN, SUREKHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10112 PARKWOOD TER
 City BETHESDA State MD Zip Code 20814-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDIMMUNE, LLC Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401434
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358656
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371032
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2726 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381539
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397124
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406512
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2727 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406875
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414664
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. KROEKER, MARGARET, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W CEDAR ST
 City HESSTON State KS Zip Code 67062-8100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417076
 Amount of Each Receipt this Period
 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2728 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROGER, LARRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2210 WOODHILL WAY
 City WAUKESHA State WI Zip Code 53189-7722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353456
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. KROGER, LARRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2210 WOODHILL WAY
 City WAUKESHA State WI Zip Code 53189-7722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353457
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. KROGER, LARRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2210 WOODHILL WAY
 City WAUKESHA State WI Zip Code 53189-7722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391920
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2729 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROGER, LARRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2210 WOODHILL WAY

City WAUKESHA	State WI	Zip Code 53189-7722
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394052

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KROGER, LARRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2210 WOODHILL WAY

City WAUKESHA	State WI	Zip Code 53189-7722
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409144

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KROHN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1427 S8TH AVENUE

City OMAHA	State NE	Zip Code 68124-
---------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.361348

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2730 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355753
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391963
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391964
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2731 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394355
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101
 PH101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408773
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KROME, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1489
 City RANCHO SANTA FE State CA Zip Code 92067-1489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANSCHEM, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352456
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2732 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROME, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1489

City RANCHO SANTA FE	State CA	Zip Code 92067-1489
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRANSCHEM, INC.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.373380

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. KROME, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1489

City RANCHO SANTA FE	State CA	Zip Code 92067-1489
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRANSCHEM, INC.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2016

Transaction ID : SA11A.375904

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KROME, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1489

City RANCHO SANTA FE	State CA	Zip Code 92067-1489
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRANSCHEM, INC.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2016

Transaction ID : SA11A.401499

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2733 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KROMMENHOEK, WILLIAM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 VUE DU BAY COURT
 City SAN DIEGO State CA Zip Code 92109-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369376
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KROMMENHOEK, WILLIAM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 VUE DU BAY COURT
 City SAN DIEGO State CA Zip Code 92109-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417083
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KROPP, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2733 MASTERS DRIVE
 City LEAGUE CITY State TX Zip Code 77573-4404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MRI TECHNOLOGIES Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.404117
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2734 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KRUEGER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 565 BONITA AVE
 City SAN MARINO State CA Zip Code 91108-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407600
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. KRUEGER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 565 BONITA AVE
 City SAN MARINO State CA Zip Code 91108-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413964
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KRUER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 HERONWOOD DRIVE
 City MILTON State DE Zip Code 19968-3660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392624
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	460.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2735 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY
 UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374160
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY
 UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399668
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KRUGER, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1611 MINUTEMEN CSWY
 UNIT 208
 City COCOA BEACH State FL Zip Code 32931-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401193
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2736 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KRUSE, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RED CEDAR ROAD
 City AMELIA ISLAND State FL Zip Code 32034-5035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364897
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KRUSE, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RED CEDAR ROAD
 City AMELIA ISLAND State FL Zip Code 32034-5035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393613
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. KRUSE, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RED CEDAR ROAD
 City AMELIA ISLAND State FL Zip Code 32034-5035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408243
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2737 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUBIN, DANIEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 BLOUNT STREET
 City HOUSTON State TX Zip Code 77008-4441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.371316
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. KUEBELBECK, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5400 NYODA WAY
 City CARMICHAEL State CA Zip Code 95608-3059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350947
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KUEBELBECK, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5400 NYODA WAY
 City CARMICHAEL State CA Zip Code 95608-3059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368757
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2738 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUEBELBECK, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5400 NYODA WAY

City CARMICHAEL	State CA	Zip Code 95608-3059
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368759

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. KUEBELBECK, BETTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5400 NYODA WAY

City CARMICHAEL	State CA	Zip Code 95608-3059
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.374651

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KUECKER, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 WEST MARKEY ROAD

City BELTON	State MO	Zip Code 64012-1709
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KUECKER LOGISTICS GROUP INC.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.416524

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2739 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUECKER, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 WEST MARKEY ROAD
 City BELTON State MO Zip Code 64012-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUECKER LOGISTICS GROUP INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.416527
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. KUENZEL, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 W HARRISON ST.
 City GARNAVILLO State IA Zip Code 52049-9764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350354
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUENZEL, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 W HARRISON ST.
 City GARNAVILLO State IA Zip Code 52049-9764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370490
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2740 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUENZEL, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 W HARRISON ST.
 City GARNAVILLO State IA Zip Code 52049-9764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422602
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KUHLMKE, W, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 MILLEDGE ROAD
 City AUGUSTA State GA Zip Code 30904-4352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUHLMKE PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396238
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KUMERLE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3317 CONSERVANCY LANE
 City CHARLESTON State SC Zip Code 29414-8114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347554
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2741 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUMMER, JANIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 S ANITA AVENUE
 City LOS ANGELES State CA Zip Code 90049-3837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : SA11A.376790
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. KUNKEL, BETTY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15803 NE THOMPSON ST
 City PORTLAND State OR Zip Code 97230-8262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386218
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. KUNKEL, BETTY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15803 NE THOMPSON ST
 City PORTLAND State OR Zip Code 97230-8262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.390904
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2742 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUNKEL, BETTY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15803 NE THOMPSON ST
 City PORTLAND State OR Zip Code 97230-8262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394144
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KUNKEL, BETTY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15803 NE THOMPSON ST
 City PORTLAND State OR Zip Code 97230-8262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398035
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUNKEL, BETTY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15803 NE THOMPSON ST
 City PORTLAND State OR Zip Code 97230-8262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398040
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2743 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUNZ, KRISTEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 CAMILLE CT
 City PFLUGERVILLE State TX Zip Code 78660-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352625
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KUPCZAK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 299 BOND STREET
 City ELK GROVE VILLAGE State IL Zip Code 60007-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK TRADING CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380531
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KUPCZAK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 299 BOND STREET
 City ELK GROVE VILLAGE State IL Zip Code 60007-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK TRADING CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384499
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2744 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUPCZAK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 299 BOND STREET
 City ELK GROVE VILLAGE State IL Zip Code 60007-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK TRADING CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413173
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KUPCZAK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 299 BOND STREET
 City ELK GROVE VILLAGE State IL Zip Code 60007-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK TRADING CO. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413176
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KUPLIS, AIVARS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2070 N CHARTER POINT DR
 City ARLINGTON HEIGHTS State IL Zip Code 60004-7221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360294
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2745 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUPLIS, AIVARS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2070 N CHARTER POINT DR
 City ARLINGTON HEIGHTS State IL Zip Code 60004-7221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399508
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KURTTI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 EVERGREEN LANE
 City NEENAH State WI Zip Code 54956-4968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405156
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KURTTI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 EVERGREEN LANE
 City NEENAH State WI Zip Code 54956-4968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405174
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2746 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KURTTI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 EVERGREEN LANE
 City NEENAH State WI Zip Code 54956-4968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419249
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KURTTI, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 964 EVERGREEN LANE
 City NEENAH State WI Zip Code 54956-4968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419253
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUSNIERZ, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 W. MACARTHUR DRIVE
 City COTTAGE HILLS State IL Zip Code 62018-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY IMPROVEMENTS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349158
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2747 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KUSNIERZ, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 W. MACARTHUR DRIVE
 City COTTAGE HILLS State IL Zip Code 62018-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY IMPROVEMENTS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359535
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KUSNIERZ, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 W. MACARTHUR DRIVE
 City COTTAGE HILLS State IL Zip Code 62018-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY IMPROVEMENTS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386388
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KUSNIERZ, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 W. MACARTHUR DRIVE
 City COTTAGE HILLS State IL Zip Code 62018-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY IMPROVEMENTS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386392
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2748 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KUSNIERZ, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 W. MACARTHUR DRIVE
 City COTTAGE HILLS State IL Zip Code 62018-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY IMPROVEMENTS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386395
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KUSNIERZ, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 W. MACARTHUR DRIVE
 City COTTAGE HILLS State IL Zip Code 62018-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY IMPROVEMENTS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386399
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUSS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15025 52ND AVE N
 City PLYMOUTH State MN Zip Code 55446-1682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384235
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2749 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KUSS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15025 52ND AVE N
 City PLYMOUTH State MN Zip Code 55446-1682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398088
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352692
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352693
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	123.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2750 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352709
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359683
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386891
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398647
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398649
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414848
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2752 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414909
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KUSUMONEGORO, SUKARNO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25269 GOLD HILLS DR
 City CASTRO VALLEY State CA Zip Code 94552-5460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UCSF Occupation (for Individual) APPLICATION PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419370
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KUTIS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10151 GRAVOIS ROAD
 City SAINT LOUIS State MO Zip Code 63123-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414598
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2753 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KUZMANIC, JOSEPH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 PRINSTONE DR
 City RANCHO MIRAGE State CA Zip Code 92270-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **07 / 07 / 2016**
Transaction ID : SA11A.345799
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KUZMANIC, JOSEPH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 PRINSTONE DR
 City RANCHO MIRAGE State CA Zip Code 92270-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410255
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KUZMANIC, JOSEPH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 PRINSTONE DR
 City RANCHO MIRAGE State CA Zip Code 92270-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410258
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2754 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. KUZMANIC, JOSEPH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 PRINSTONE DR
 City RANCHO MIRAGE State CA Zip Code 92270-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410278
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KWIATKOWSKI, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 HEPPLWHITE CT
 City FORT COLLINS State CO Zip Code 80526-3818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372270
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KWIATKOWSKI, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 HEPPLWHITE CT
 City FORT COLLINS State CO Zip Code 80526-3818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.398097
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2755 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LABORDE, D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 ROLLINGWOOD DRIVE
 City ROLLING HILLS ESTA State CA Zip Code 90274-2426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361492
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LABORDE, D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 ROLLINGWOOD DRIVE
 City ROLLING HILLS ESTA State CA Zip Code 90274-2426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392882
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LABRIOLA, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1673
 City PINETOP State AZ Zip Code 85935-1673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361476
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2756 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LABRIOLA, FRANCIS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12013 S HONAH LEE CT
 City PHOENIX State AZ Zip Code 85044-3452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403452
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LACEY, DAVID, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 ARDATH DRIVE
 City CAMBRIA State CA Zip Code 93428-5524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393670
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LACROIX, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9252 CORAL ISLE WAY
 City FORT MYERS State FL Zip Code 33919-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348633
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2757 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LACROIX, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9252 CORAL ISLE WAY
 City FORT MYERS State FL Zip Code 33919-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365157
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LACROIX, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9252 CORAL ISLE WAY
 City FORT MYERS State FL Zip Code 33919-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397883
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LACROIX, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9252 CORAL ISLE WAY
 City FORT MYERS State FL Zip Code 33919-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397884
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2758 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LACROIX, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9252 CORAL ISLE WAY
 City FORT MYERS State FL Zip Code 33919-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397885
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LADY, TERRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1533 HARBOR ROAD
 City WILLIAMSBURG State VA Zip Code 23185-7630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROVIDENCE HEALTH ADVIORS Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365177
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LAFFEY, THOMAS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 FRONTENAC FIRST
 City SAINT LOUIS State MO Zip Code 63131-3223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRAWFORD GROUP INC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364264
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2975.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2759 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAFITTE, DARRELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 LAKESIDE PARK

City DALLAS	State TX	Zip Code 75225-8110
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MADDEN ASSET MGT	Occupation (for Individual) INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.418816

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. LAGO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3325 LIZARD HEAD LANE

City SEDONA	State AZ	Zip Code 86336-3025
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 27 / 2016
Transaction ID : SA11A.411403

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. LAIB, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address RD3 775 OAKWOOD DRIVE
RD 3

City KINGSTON	State NY	Zip Code 12401-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
07 / 25 / 2016
Transaction ID : SA11A.354547

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2760 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RD3 775 OAKWOOD DRIVE
 RD 3
 City KINGSTON State NY Zip Code 12401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.380030
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RD3 775 OAKWOOD DRIVE
 RD 3
 City KINGSTON State NY Zip Code 12401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405580
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RD3 775 OAKWOOD DRIVE
 RD 3
 City KINGSTON State NY Zip Code 12401-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408712
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2761 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAKE, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2805 MESCALERO COURT
 City COLLEGE STATION State TX Zip Code 77845-7708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORGAN FITZGERALDS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354183
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

B. LAKEY, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61702 WILLIAMSBURG DR. UNIT #1
 City SOUTH LYON State MI Zip Code 48178-1760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354478
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LAKEY, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61702 WILLIAMSBURG DR. UNIT #1
 City SOUTH LYON State MI Zip Code 48178-1760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379976
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2762 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAKEY, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61702 WILLIAMSBURG DR.
 UNIT #1
 City SOUTH LYON State MI Zip Code 48178-1760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408695
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LAKEY, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61702 WILLIAMSBURG DR.
 UNIT #1
 City SOUTH LYON State MI Zip Code 48178-1760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419663
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LAMB, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1587 SOUTH SHORE DRIVE
 City HOLLAND State MI Zip Code 49423-4436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419751
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2763 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAMORTA, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1610 GREENVIEW CT
City WOODSTOCK State GA Zip Code 30189-1537
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412166
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LANCASTER, FRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 891
10441 E HWY 85
City PEARSALL State TX Zip Code 78061-0891
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390175
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LANCASTER, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1808 BELMONT RD NW
APT 2
City WASHINGTON State DC Zip Code 20009-5186
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) COMCAST CORP Occupation (for Individual) VP FED GOV AFFAIRS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407441
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2764 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANCEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6733 11TH AVE NW
 City SEATTLE State WA Zip Code 98117-5214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCKENZIE CHASE MANAGEMENT Occupation (for Individual) TAX CREDIT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412180
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LANDENBERGER, C FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 S ABREGO DRIVE #208
 City GREEN VALLEY State AZ Zip Code 85614-1551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406751
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LANDES, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 SOUTH LAKEWOOD DRIVE
 City SAINT JOSEPH State MO Zip Code 64506-4599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349964
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2765 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANDES, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 SOUTH LAKEWOOD DRIVE
 City SAINT JOSEPH State MO Zip Code 64506-4599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387444
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388483
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392235
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2766 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417994
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418038
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADI LLC Occupation (for Individual) IT BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422563
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2767 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANDGRAF, ALANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E. SCOTT 304
 City CHICAGO State IL Zip Code 60610-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADII LLC Occupation (for Individual) IT BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423100
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LANDIS, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 988 BOULEVARD OF THE ARTS, APT 511
 City SARASOTA State FL Zip Code 34236-4835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379436
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LANDIS, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 BLUE HERON TRAIL
 City EASTPOINT State FL Zip Code 32328-2142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDIS INTERNATIONAL Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349902
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2768 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANDUCCI, A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 SCENIC WAY
 201
 City SAN MATEO State CA Zip Code 94403-3161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357537
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. LANDUCCI, A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 SCENIC WAY
 201
 City SAN MATEO State CA Zip Code 94403-3161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384255
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. LANE, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5836 W. SUNNYSIDE DRIVE
 City VISALIA State CA Zip Code 93277-9281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUILDING INDUSTRY ASSOCIATION Occupation (for Individual) BUILDING INDUSTRY ASSOCIATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350093
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2769 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANE, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5836 W. SUNNYSIDE DRIVE
 City VISALIA State CA Zip Code 93277-9281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUILDING INDUSTRY ASSOCIATION Occupation (for Individual) BUILDING INDUSTRY ASSOCIATION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 331.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378877
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LANE, LANDON, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 4TH AVENUE DRIVE NW
 City HICKORY State NC Zip Code 28601-3453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366005
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LANE, LANDON, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1006 4TH AVENUE DRIVE NW
 City HICKORY State NC Zip Code 28601-3453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409601
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2770 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANE, RICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13752 DANVERS PLACE

City DALLAS	State TX	Zip Code 75240-3505
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388468

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LANE, SEAN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 MEAD POINT DRIVE

City GREENWICH	State CT	Zip Code 06830-7225
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KINSALE ADVISORS, LLC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422440

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

C. LANE, SEAN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 MEAD POINT DRIVE

City GREENWICH	State CT	Zip Code 06830-7225
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KINSALE ADVISORS, LLC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
318.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422447

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	318.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2771 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANE, SEAN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 MEAD POINT DRIVE
 City GREENWICH State CT Zip Code 06830-7225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINSALE ADVISORS, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 318.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422514
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LANE, SEAN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 MEAD POINT DRIVE
 City GREENWICH State CT Zip Code 06830-7225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINSALE ADVISORS, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 318.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422518
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LANG, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 378 SUMMIT ST.
 City WADSWORTH State OH Zip Code 44281-2278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355387
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 275.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2772 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 378 SUMMIT ST.
 City WADSWORTH State OH Zip Code 44281-2278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372351
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LANG, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 378 SUMMIT ST.
 City WADSWORTH State OH Zip Code 44281-2278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372354
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LANG, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 378 SUMMIT ST.
 City WADSWORTH State OH Zip Code 44281-2278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372356
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2773 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 TULIP DRIVE

City LLOYD HARBOR	State NY	Zip Code 11743-9761
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUND WATCH CONSULTING	Occupation (for Individual) CONSULTING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344483

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

B. LANG, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 TULIP DRIVE

City LLOYD HARBOR	State NY	Zip Code 11743-9761
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUND WATCH CONSULTING	Occupation (for Individual) CONSULTING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390113

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

C. LANG, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 TULIP DRIVE

City LLOYD HARBOR	State NY	Zip Code 11743-9761
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUND WATCH CONSULTING	Occupation (for Individual) CONSULTING
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390114

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	176.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2774 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 BOOTLEGGERS LANE
 City KERRVILLE State TX Zip Code 78028-7597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357506
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LANG, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 BOOTLEGGERS LANE
 City KERRVILLE State TX Zip Code 78028-7597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.359994
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LANG, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 BOOTLEGGERS LANE
 City KERRVILLE State TX Zip Code 78028-7597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382447
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2775 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 BOOTLEGGERS LANE

City KERRVILLE	State TX	Zip Code 78028-7597
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382712

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LANG, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 BOOTLEGGERS LANE

City KERRVILLE	State TX	Zip Code 78028-7597
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412999

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LANG, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 BOOTLEGGERS LANE

City KERRVILLE	State TX	Zip Code 78028-7597
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.416116

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2776 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANG, TREVOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5186 BALDWIN TERRACE
 City MARIETTA State GA Zip Code 30068-1578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLOOR & DECOR Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357547
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LANG, TREVOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5186 BALDWIN TERRACE
 City MARIETTA State GA Zip Code 30068-1578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLOOR & DECOR Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385199
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LANG, TREVOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5186 BALDWIN TERRACE
 City MARIETTA State GA Zip Code 30068-1578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLOOR & DECOR Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413033
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2777 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE
 319
 City LOVELAND State CO Zip Code 80537-7377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354696
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE
 319
 City LOVELAND State CO Zip Code 80537-7377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.362978
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE
 319
 City LOVELAND State CO Zip Code 80537-7377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.362979
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2778 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE
 319
 City LOVELAND State CO Zip Code 80537-7377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377433
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE
 319
 City LOVELAND State CO Zip Code 80537-7377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378610
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. LANGENDORF, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 S GARFIELD AVE
 319
 City LOVELAND State CO Zip Code 80537-7377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382339
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2779 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGENDORF, PATRICIA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2101 S GARFIELD AVE
319

City LOVELAND State CO Zip Code 80537-7377

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2016

Transaction ID : SA11A.394785

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LANGENDORF, PATRICIA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2101 S GARFIELD AVE
319

City LOVELAND State CO Zip Code 80537-7377

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.405105

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LANGELIUS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CLINTON STREET

City WHITE PLAINS State NY Zip Code 10603-3604

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016

Transaction ID : SA11A.379846

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2780 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGELIUS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CLINTON STREET

City WHITE PLAINS	State NY	Zip Code 10603-3604
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398525

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LANGELIUS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CLINTON STREET

City WHITE PLAINS	State NY	Zip Code 10603-3604
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408486

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LANGELIUS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CLINTON STREET

City WHITE PLAINS	State NY	Zip Code 10603-3604
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408488

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2781 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGELIUS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CLINTON STREET
 City WHITE PLAINS State NY Zip Code 10603-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408492
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LANGELIUS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CLINTON STREET
 City WHITE PLAINS State NY Zip Code 10603-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408493
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LANGER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 792 WASHBURN ST.
 City TEANECK State NJ Zip Code 07666-2243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COZEN O'CONNOR Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388801
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2782 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGENFELD, THOMAS, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1107 HYMAN COURT

City CROFTON	State MD	Zip Code 21114-1356
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358765

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LANGENFELD, THOMAS, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1107 HYMAN COURT

City CROFTON	State MD	Zip Code 21114-1356
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417067

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. LANGHIRT, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1113 WASHINGTONVILLE DRIVE

City BALTIMORE	State MD	Zip Code 21210-1051
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DLA PIPER LLP (US)	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.349967

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2783 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANGLOIS, ANDREW, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 TOWER DRIVE

City WESTON	State CT	Zip Code 06883-2715
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.396252

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LANGLOIS, CHESTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3003 SOUTH ATLANTIC AVE.
APT. 17A1

City DAYTONA BEACH SHOR	State FL	Zip Code 32118-6196
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405945

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. LANMAN, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2812 PASEO DEL MAR

City PALOS VERDES ESTAT	State CA	Zip Code 90274-4318
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365398

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2784 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANTZY, RONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 HADDON DR
 City BIRMINGHAM State AL Zip Code 35226-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392836
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LANTZY, RONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 HADDON DR
 City BIRMINGHAM State AL Zip Code 35226-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407728
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. LANTZY, RONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 HADDON DR
 City BIRMINGHAM State AL Zip Code 35226-6298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407730
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2785 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANZA, FRANK, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 9TH AVENUE
APT. 202

City SAN MATEO State CA Zip Code 94401-4238

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016

Transaction ID : SA11A.378529

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LARKIN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 CHEROKEE ROAD

City CHARLOTTE State NC Zip Code 28207-1906

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNC CHARLOTTE Occupation (for Individual) TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11A.355710

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LARKIN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 CHEROKEE ROAD

City CHARLOTTE State NC Zip Code 28207-1906

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNC CHARLOTTE Occupation (for Individual) TEACHER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2016

Transaction ID : SA11A.408221

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2786 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARKIN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 21ST ST

City MANHATTAN BEACH	State CA	Zip Code 90266-4550
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPECTIVE, INC.	Occupation (for Individual) PRESIDENT AND CO-FOUNDER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367974

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. LARKIN, THOMAS, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 19751

City IRVINE	State CA	Zip Code 92623-9751
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362764

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

C. LAROSA, AGNES, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 GLAD VALLEY DRIVE

City BILLERICA	State MA	Zip Code 01821-2616
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354941

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2787 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAROSA, AGNES, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 GLAD VALLEY DRIVE
 City BILLERICA State MA Zip Code 01821-2616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360112
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. LAROSE, PETER, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6745 SOUTHPOINTE PKWY
 City BRECKSVILLE State OH Zip Code 44141-3267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HOUSE OF LAROSE Occupation (for Individual) ALCOHOL DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346078
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LAROSE, THOMAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6745 SOUTHPOINTE PKWY
 City BRECKSVILLE State OH Zip Code 44141-3267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HOUSE OF LAROSE Occupation (for Individual) ALCOHOL DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346079
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2788 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARRABEE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5682 COLLETTE RIDGE CIRCLE

City COLLETTSVILLE	State NC	Zip Code 28611-9143
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350769

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LARRABEE, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5682 COLLETTE RIDGE CIRCLE

City COLLETTSVILLE	State NC	Zip Code 28611-9143
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415718

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LARROUDE, JUAN, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 522 16TH STREET

City SAINT AUGUSTINE	State FL	Zip Code 32084-1521
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389478

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2789 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARROUDE, JUAN, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 522 16TH STREET
 City SAINT AUGUSTINE State FL Zip Code 32084-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414488
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LARSEN, JOHN., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 SHORE DRIVE
 City GIG HARBOR State WA Zip Code 98335-7669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408549
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LARSON, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 857 ALISAL ROAD
 City SOLVANG State CA Zip Code 93463-2137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364465
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2790 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 827 WASHINGTON CROSSING ROAD
 City NEWTOWN State PA Zip Code 18940-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRANDBERG AND ASSOCIATES P.C. Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386974
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LARSON, CHARLES, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1816 WILDBERRY DRIVE CQ
 City GLENVIEW State IL Zip Code 60025-1788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409154
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LARSON, ELWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1443 N 133RD ST
 City OMAHA State NE Zip Code 68154-5289
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359428
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2791 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 VIA ALICIA
 City SANTA BARBARA State CA Zip Code 93108-1746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEOSOLS CONSULTANT Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358529
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LARSON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1458 W MATTIE RD.
 City CLEARVILLE State PA Zip Code 15535-7546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.347011
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LARSON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1458 W MATTIE RD.
 City CLEARVILLE State PA Zip Code 15535-7546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380593
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2792 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1458 W MATTIE RD.
 City CLEARVILLE State PA Zip Code 15535-7546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392053
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LARSON, LARRY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1749 278TH AVENUE
 City PRINCETON State IA Zip Code 52768-9610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406778
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207
 City ASPEN State CO Zip Code 81612-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347490
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2793 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207

City ASPEN	State CO	Zip Code 81612-8207
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353548

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207

City ASPEN	State CO	Zip Code 81612-8207
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365808

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207

City ASPEN	State CO	Zip Code 81612-8207
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368645

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2794 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207

City ASPEN	State CO	Zip Code 81612-8207
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.373372

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207

City ASPEN	State CO	Zip Code 81612-8207
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11A.375738

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207

City ASPEN	State CO	Zip Code 81612-8207
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11A.390349

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2795 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207
 City ASPEN State CO Zip Code 81612-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393712
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207
 City ASPEN State CO Zip Code 81612-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404212
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LARSON, MADELEINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8207
 City ASPEN State CO Zip Code 81612-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408473
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2796 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARSON, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 864 E BIRCH AVENUE
 City WHITEFISH BAY State WI Zip Code 53217-5359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUSTAVE A. LARSON CO. Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379103
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LARSON, WILFRED, JOSEPH, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 BAHIA POINT
 City NAPLES State FL Zip Code 34103-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361507
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LARYWON, KENNETH, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 TULIP LANE
 City NEW ROCHELLE State NY Zip Code 10804-1915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTIN CLEARWATER BELL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364263
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2797 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARYWON, KENNETH, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 TULIP LANE
 City NEW ROCHELLE State NY Zip Code 10804-1915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTIN CLEARWATER BELL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LASICH, POLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 DUPONT CIRCLE #306
 City VIRGINIA BEACH State VA Zip Code 23455-2983
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346913
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LASICH, POLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 DUPONT CIRCLE #306
 City VIRGINIA BEACH State VA Zip Code 23455-2983
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365747
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2798 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LASICH, POLLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3800 DUPONT CIRCLE #306

City VIRGINIA BEACH State VA Zip Code 23455-2983

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393634

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. LATCHAM, CHESTER, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2800 S UNIVERSITY BOULEVARD UNIT 4

City DENVER State CO Zip Code 80210-6059

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHEA HOMES Occupation (for Individual) HOMEBUILDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354919

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. LATCHAM, CHESTER, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2800 S UNIVERSITY BOULEVARD UNIT 4

City DENVER State CO Zip Code 80210-6059

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHEA HOMES Occupation (for Individual) HOMEBUILDER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361336

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2799 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LATHAM, JAMES, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5005 BRIDGEWATER DRIVE
 City ARLINGTON State TX Zip Code 76017-2778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.367271
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LATHAM, JAMES, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5005 BRIDGEWATER DRIVE
 City ARLINGTON State TX Zip Code 76017-2778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396406
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LATHAM, KENNETH, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 WOODLEE ROAD
 City COLD SPRING HARBOR State NY Zip Code 11724-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373771
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2800 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LATIMER, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38W668 EVANSWOOD LANE

City SAINT CHARLES	State IL	Zip Code 60175-6043
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399480

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LAU, JOSEFINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1765 18TH ST

City ORANGE CITY	State FL	Zip Code 32763-2414
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359231

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LAU, JOSEFINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1765 18TH ST

City ORANGE CITY	State FL	Zip Code 32763-2414
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388516

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2801 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAU, JOSEFINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1765 18TH ST
 City ORANGE CITY State FL Zip Code 32763-2414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413973
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LAU, JOSEFINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1765 18TH ST
 City ORANGE CITY State FL Zip Code 32763-2414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422454
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LAU, JOSEFINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1765 18TH ST
 City ORANGE CITY State FL Zip Code 32763-2414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422458
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2802 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAU, JOSEFINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1765 18TH ST
 City ORANGE CITY State FL Zip Code 32763-2414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422469
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAU, JOSEFINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1765 18TH ST
 City ORANGE CITY State FL Zip Code 32763-2414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422471
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LAUBER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7805 GERALAYNE CIR
 City WAUWATOSA State WI Zip Code 53213-3409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAUBERCFOS, INC Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352216
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2803 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAUER, THOMAS, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 ARLINGTON ST
 APT TH
 City BOSTON State MA Zip Code 02116-3413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.379112
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. LAUINGER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3510 TURTLE CREEK BOULEVARD
 APT 6C
 City DALLAS State TX Zip Code 75219-5543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENN WELL CORPORATION Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.397247
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. LAURENO, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SADDLE DRIVE
 City EAST GRANBY State CT Zip Code 06026-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 07 / 19 / 2016
Transaction ID : SA11A.350833
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2804 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAURENO, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SADDLE DRIVE
 City EAST GRANBY State CT Zip Code 06026-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352483
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAURENO, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SADDLE DRIVE
 City EAST GRANBY State CT Zip Code 06026-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382582
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LAURENO, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SADDLE DRIVE
 City EAST GRANBY State CT Zip Code 06026-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382583
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2805 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAURENO, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SADDLE DRIVE
 City EAST GRANBY State CT Zip Code 06026-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402743
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LAURENO, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SADDLE DRIVE
 City EAST GRANBY State CT Zip Code 06026-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412826
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LAURITZEN, BRUCE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 FAIRACRES RD
 City OMAHA State NE Zip Code 68132-1806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST NATIONAL BANK OF OMAHA Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385243
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100075.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2806 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAUVER, RAYMOND, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 CAROLINA MEADOWS VILLA
 City CHAPEL HILL State NC Zip Code 27517-7519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 50325-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348215
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 50325-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348504
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2807 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350381

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352093

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391969

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2808 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394475

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403441

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LAVENDER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address AV LOS DEPORTES 13

City ACAPULCO	State IA	Zip Code 50325-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410745

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2809 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAVENDER, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address AV LOS DEPORTES 13
 City ACAPULCO State IA Zip Code 50325-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.411622
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAVIETES, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3286 NORTHSIDE PARKWAY NW APT 601
 City ATLANTA State GA Zip Code 30327-2241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.367082
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LAWLER, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROCKLEDGE RD
 City LAGUNA BEACH State CA Zip Code 92651-3944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.355218
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2810 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWLEY, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 DELAWARE AVE
 City BUFFALO State NY Zip Code 14202-1622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWLEY INSURANCE Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385234
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LAWLEY, WILLIAM, J., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 DELAWARE AVE
 City BUFFALO State NY Zip Code 14202-1622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWLEY INSURANCE Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385235
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LAWRENCE, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 426 SPENCER AVE.
 City LANCASTER State PA Zip Code 17603-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348784
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2811 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWRENCE, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 426 SPENCER AVE.
 City LANCASTER State PA Zip Code 17603-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352472
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LAWRENCE, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 426 SPENCER AVE.
 City LANCASTER State PA Zip Code 17603-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375911
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LAWRENCE, BYRON, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 426 SPENCER AVE.
 City LANCASTER State PA Zip Code 17603-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401505
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2812 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWRENCE, BYRON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 426 SPENCER AVE.
City LANCASTER State PA Zip Code 17603-4933
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412262
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LAWRENCE, DAVID, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2227 E VISTA ROYALE DRIVE
City ORANGE State CA Zip Code 92867-1730
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350990
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LAWRENCE, DAVID, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2227 E VISTA ROYALE DRIVE
City ORANGE State CA Zip Code 92867-1730
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378911
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2813 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWRENCE, DAVID, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2227 E VISTA ROYALE DRIVE
 City ORANGE State CA Zip Code 92867-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391944
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LAWRENCE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 SANDFLY LANE
 City VERO BEACH State FL Zip Code 32963-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389386
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LAWRENCE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 N WILD MOUNTAIN ROAD
 City TULSA State OK Zip Code 74127-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356553
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2814 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAWRENCE, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 JOSHUA AVE
 City SAN MARCOS State CA Zip Code 92069-5819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS Occupation (for Individual) ELECTRONICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.394580
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LAWRENCE, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 JOSHUA AVE
 City SAN MARCOS State CA Zip Code 92069-5819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS Occupation (for Individual) ELECTRONICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416649
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LAWS, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 N PORTOLA
 City LAGUNA BEACH State CA Zip Code 92651-6707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397280
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2815 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 216
 City CAROLINA BEACH State NC Zip Code 28428-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349350
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 216
 City CAROLINA BEACH State NC Zip Code 28428-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363836
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 216
 City CAROLINA BEACH State NC Zip Code 28428-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364801
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2816 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 216
 City CAROLINA BEACH State NC Zip Code 28428-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387709
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 216
 City CAROLINA BEACH State NC Zip Code 28428-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399525
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LAYNE, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 216
 City CAROLINA BEACH State NC Zip Code 28428-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403422
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2817 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LAZARUS, MARK, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SHERWOOD FARM LANE
 City GREENWICH State CT Zip Code 06831-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NBC SPORTS Occupation (for Individual) CHAIRMAN NBCU SPORTS & OLYMPIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421195
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LAZARUS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13372 VERDUN DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33410-1473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCH VENTURE PARTNERS Occupation (for Individual) VENTURE CAPITAL INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407870
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. LE, HUONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9278 ADELPHI RD 301
 City HYATTSVILLE State MD Zip Code 20783-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDSTAR WHC Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394235
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2818 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 CLIFFEWOOD PLACE
 City SHREVEPORT State LA Zip Code 71106-7703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355662
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. LEA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 CLIFFEWOOD PLACE
 City SHREVEPORT State LA Zip Code 71106-7703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372536
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. LEAFSTEDT, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5430 E EL PARQUE
 City LONG BEACH State CA Zip Code 90815-4125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356241
 Amount of Each Receipt this Period
 999.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1749.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2819 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEAFSTEDT, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5430 E EL PARQUE
 City LONG BEACH State CA Zip Code 90815-4125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2248.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388843
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LEAHY, POLLY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2717 E. RIDGE RD.
 City BELOIT State WI Zip Code 53511-3989
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348345
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEAHY, POLLY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2717 E. RIDGE RD.
 City BELOIT State WI Zip Code 53511-3989
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349826
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2820 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEAHY, POLLY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2717 E. RIDGE RD.
 City BELOIT State WI Zip Code 53511-3989
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 07 / 2016
Transaction ID : SA11A.363274
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEAHY, POLLY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2717 E. RIDGE RD.
 City BELOIT State WI Zip Code 53511-3989
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.375064
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEAHY, POLLY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2717 E. RIDGE RD.
 City BELOIT State WI Zip Code 53511-3989
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405190
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2821 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEAHY, POLLY, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2717 E. RIDGE RD.

City BELOIT	State WI	Zip Code 53511-3989
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414870

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LEATHERS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 MILFORD DRIVE

City CORONA DEL MAR	State CA	Zip Code 92625-3117
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEGGITT DEFENSE SYSTEMS	Occupation (for Individual) BOARD MEMBER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397712

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LEATHERS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 MILFORD DRIVE

City CORONA DEL MAR	State CA	Zip Code 92625-3117
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEGGITT DEFENSE SYSTEMS	Occupation (for Individual) BOARD MEMBER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397713

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2822 OF 5722
	<input checked="checked" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEAVENWORTH, ELAINE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 N KINGSBURY UNIT 1054
 City CHICAGO State IL Zip Code 60610-7449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT Occupation (for Individual) CHIEF MARKETING OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.361543
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. LEBHERZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 W HILLSDALE
 City SAN MATEO State CA Zip Code 94402-3768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISI Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348121
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. LEBLEU, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7458 EASTLAKE RD
 City STERLINGTON State LA Zip Code 71280-3216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIXIE PULP & PAPER, INC. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382979
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2823 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEBLEU, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7458 EASTLAKE RD
 City STERLINGTON State LA Zip Code 71280-3216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIXIE PULP & PAPER, INC. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411336
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. LECCESE, SALVADOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9021 LAKE HOPE DR
 City MAITLAND State FL Zip Code 32751-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410244
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. LECCESE, SALVADOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9021 LAKE HOPE DR
 City MAITLAND State FL Zip Code 32751-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410245
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2824 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LECCESE, SALVADOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9021 LAKE HOPE DR
 City MAITLAND State FL Zip Code 32751-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410259
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LECCESE, SALVADOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9021 LAKE HOPE DR
 City MAITLAND State FL Zip Code 32751-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410261
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LECHLEITER, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE NORTH ILLINOIS RESIDENCE 2302
 City INDIANAPOLIS State IN Zip Code 46204-1935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELI LILLY & CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346075
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2825 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LECOMPTE, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 ALLERTON ROAD
 City LEBANON State NJ Zip Code 08833-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365249
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LEDDY, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 SEVEN FARMS DRIVE STE F 356
 City DANIEL ISLAND State SC Zip Code 29492-8522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEDDY ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386026
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEDDY, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 SEVEN FARMS DRIVE STE F 356
 City DANIEL ISLAND State SC Zip Code 29492-8522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEDDY ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399102
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2826 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LEDDY, CAROLYN, , ,

Mailing Address **186 SEVEN FARMS DRIVE STE F 356**

City **DANIEL ISLAND** State **SC** Zip Code **29492-8522**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LEDDY ENTERPRISES** Occupation (for Individual) **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 15 / 2016

Transaction ID : SA11A.399106

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LEE, CHARLES, , ,

Mailing Address **4938 COMMONWEALTH AVENUE**

City **LA CANADA FLINTRID** State **CA** Zip Code **91011-2514**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 25 / 2016

Transaction ID : SA11A.408251

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LEE, CHARLES, , ,

Mailing Address **11812 PRESON BROOK PLACE**

City **DALLAS** State **TX** Zip Code **75230-2353**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BES**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.409625

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **850.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2827 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, ELEANOR, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1930 W. RIVER BEND CT.

City MEQUON	State WI	Zip Code 53092-2925
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349705

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LEE, ELEANOR, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1930 W. RIVER BEND CT.

City MEQUON	State WI	Zip Code 53092-2925
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353325

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LEE, ELEANOR, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1930 W. RIVER BEND CT.

City MEQUON	State WI	Zip Code 53092-2925
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394509

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2828 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, ELEANOR, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1930 W. RIVER BEND CT.
City MEQUON State WI Zip Code 53092-2925
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411928
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LEE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3344 PEACHTREE ROAD NE UNIT 3504
City ATLANTA State GA Zip Code 30326-4801
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) JAKIT VENTURES, LLC Occupation (for Individual) INVESTMENT MANAGEMENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349715
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LEE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3344 PEACHTREE ROAD NE UNIT 3504
City ATLANTA State GA Zip Code 30326-4801
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) JAKIT VENTURES, LLC Occupation (for Individual) INVESTMENT MANAGEMENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407907
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2829 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 SPEEDWELL ROAD
City CHATSWORTH State NJ Zip Code 08019-2209
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.360955
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LEE, PATRICK, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 13 SUNRISE CAY DR
City KEY LARGO State FL Zip Code 33037-5301
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) PATRICK P. LEE FOUNDATION Occupation (for Individual) CHAIRMAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.393896
Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. LEE, R., H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 330
City MONTICELLO State AR Zip Code 71657-0330
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392778
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2830 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, TAI, Y., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **10 E LEE STREET**
UNIT 1501

City **BALTIMORE** State **MD** Zip Code **21202-6019**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **PTC INT'L** Occupation (for Individual) **ECONOMIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 12 / 2016**

Transaction ID : SA11A.392590

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

B. LEE, TSAIFENG, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **722 E 2620 N**

City **PROVO** State **UT** Zip Code **84604-4056**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED B.Y.U.** Occupation (for Individual) **RETIRED FACULTY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt **07 / 14 / 2016**

Transaction ID : SA11A.346275

Amount of Each Receipt this Period **35.00**

Memo Item CONTRIBUTION

C. LEE, TSAIFENG, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **722 E 2620 N**

City **PROVO** State **UT** Zip Code **84604-4056**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED B.Y.U.** Occupation (for Individual) **RETIRED FACULTY**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt **08 / 11 / 2016**

Transaction ID : SA11A.364494

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	735.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2831 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, TSAIFENG, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 E 2620 N
 City PROVO State UT Zip Code 84604-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED B.Y.U. Occupation (for Individual) RETIRED FACULTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389838
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. LEE, TSAIFENG, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 E 2620 N
 City PROVO State UT Zip Code 84604-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED B.Y.U. Occupation (for Individual) RETIRED FACULTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.406564
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. LEE, WILLIAM, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3665 OVERBROOK LANE
 City HOUSTON State TX Zip Code 77027-4127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINSON & ELKINS L.L.P. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365010
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2832 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LEE, WILLIAM, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3665 OVERBROOK LANE
 City HOUSTON State TX Zip Code 77027-4127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINSON & ELKINS L.L.P. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375122
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LEE, WILLIAM, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3665 OVERBROOK LANE
 City HOUSTON State TX Zip Code 77027-4127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINSON & ELKINS L.L.P. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409274
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LEE-HIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 E 34TH STREET APT 11R
 City NEW YORK State NY Zip Code 10016-4751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381178
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2833 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEECH, CYNTHIA, , ,

Mailing Address 991 VISTA RIDGE DR.

City ROUND MOUNTAIN	State TX	Zip Code 78663-5031
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.350224

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEECH, CYNTHIA, , ,

Mailing Address 991 VISTA RIDGE DR.

City ROUND MOUNTAIN	State TX	Zip Code 78663-5031
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11A.380362

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEECH, CYNTHIA, , ,

Mailing Address 991 VISTA RIDGE DR.

City ROUND MOUNTAIN	State TX	Zip Code 78663-5031
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11A.380371

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2834 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEECH, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 991 VISTA RIDGE DR.
 City ROUND MOUNTAIN State TX Zip Code 78663-5031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417605
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEEKLEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5836 2 MILE ROAD
 City GLADWIN State MI Zip Code 48624-9236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406844
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LEEPER, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36567 S OCOTILLO CANYON DRIVE
 City TUCSON State AZ Zip Code 85739-2287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366548
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2835 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEGGETT, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4722 BROWNSBORO RD
 City LOUISVILLE State KY Zip Code 40207-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376313
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEGGETT, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4722 BROWNSBORO RD
 City LOUISVILLE State KY Zip Code 40207-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380448
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEGGETT, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4722 BROWNSBORO RD
 City LOUISVILLE State KY Zip Code 40207-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391137
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2836 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEGGETT, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4722 BROWNSBORO RD
 City LOUISVILLE State KY Zip Code 40207-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391143
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEGGETT, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4722 BROWNSBORO RD
 City LOUISVILLE State KY Zip Code 40207-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391145
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LEGGETT, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4722 BROWNSBORO RD
 City LOUISVILLE State KY Zip Code 40207-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403384
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2837 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEGLER, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 RIVERPLACE BLVD. #910
 910
 City JACKSONVILLE State FL Zip Code 32207-9103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRSCHNER & LEGLER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357518
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LEGLER, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 RIVERPLACE BLVD. #910
 910
 City JACKSONVILLE State FL Zip Code 32207-9103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRSCHNER & LEGLER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358247
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LEGLER, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 RIVERPLACE BLVD. #910
 910
 City JACKSONVILLE State FL Zip Code 32207-9103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRSCHNER & LEGLER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382778
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2838 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEGLER, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 RIVERPLACE BLVD. #910
 910
 City JACKSONVILLE State FL Zip Code 32207-9103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRSCHNER & LEGLER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413142
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LEGOY, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 MARTHIAM AVE
 City RENO State NV Zip Code 89509-5062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAUPIN, COX & LEGOY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359885
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LEGOY, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 MARTHIAM AVE
 City RENO State NV Zip Code 89509-5062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAUPIN, COX & LEGOY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384744
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2839 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEGOY, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 MARTHIAM AVE
 City RENO State NV Zip Code 89509-5062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAUPIN, COX & LEGOY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419548
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEHMAN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8315 SUNSET DRIVE
 City MANASSAS State VA Zip Code 20110-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361425
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LEHMANN, ELROY, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6417 W KENSINGTON ROAD
 City OKLAHOMA CITY State OK Zip Code 73132-2627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374353
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2840 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEHMANN, WOLFGANG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 KING FARM BOULEVARD
 UNIT 144
 City ROCKVILLE State MD Zip Code 20850-6167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEHMANN, WOLFGANG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 KING FARM BOULEVARD
 UNIT 144
 City ROCKVILLE State MD Zip Code 20850-6167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391804
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. LEHMANN, WOLFGANG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 KING FARM BOULEVARD
 UNIT 144
 City ROCKVILLE State MD Zip Code 20850-6167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391807
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2841 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEHMANN, WOLFGANG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 KING FARM BOULEVARD
 UNIT 144
 City ROCKVILLE State MD Zip Code 20850-6167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406799
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEHNEIS, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3058 HIGHLANDER DR
 City BEAVERCREEK State OH Zip Code 45432-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US AIR FORCE Occupation (for Individual) METEOROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382361
 Amount of Each Receipt this Period 353.00
 Memo Item CONTRIBUTION

C. LEIBOWITZ, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 885 PARK AVE APT 5C
 City NEW YORK State NY Zip Code 10075-0383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTER EMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398483
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1403.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2842 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEIBUNDGUTH, MARY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 220
 City WICOMICO CHURCH State VA Zip Code 22579-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359582
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEIBUNDGUTH, MARY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 220
 City WICOMICO CHURCH State VA Zip Code 22579-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359751
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEIBUNDGUTH, MARY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 220
 City WICOMICO CHURCH State VA Zip Code 22579-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374835
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2843 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEIBUNDGUTH, MARY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 220
 City WICOMICO CHURCH State VA Zip Code 22579-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382525
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEIBUNDGUTH, MARY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 220
 City WICOMICO CHURCH State VA Zip Code 22579-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409108
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEIGH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2926 LAUREL PARK HWY.
 City HENDERSONVILLE State NC Zip Code 28739-8980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 709.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348744
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2844 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEIGH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE	State NC	Zip Code 28739-8980
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
709.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374412

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LEIGH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE	State NC	Zip Code 28739-8980
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
709.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384849

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LEIGH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE	State NC	Zip Code 28739-8980
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
709.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399483

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2845 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEIGH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE	State NC	Zip Code 28739-8980
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
709.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407812

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LEIGH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2926 LAUREL PARK HWY.

City HENDERSONVILLE	State NC	Zip Code 28739-8980
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
709.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.421972

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LEIN, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 508 MAIN STREET
P.O. BOX 57

City MADISON LAKE	State MN	Zip Code 56063-2027
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LATITUDE 44, INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359930

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2846 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEIN, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 508 MAIN STREET
P.O. BOX 57

City MADISON LAKE State MN Zip Code 56063-2027

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LATITUDE 44, INC. Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384778

Amount of Each Receipt this Period 59.00

Memo Item CONTRIBUTION

B. LEIN, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 508 MAIN STREET
P.O. BOX 57

City MADISON LAKE State MN Zip Code 56063-2027

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LATITUDE 44, INC. Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419618

Amount of Each Receipt this Period 59.00

Memo Item CONTRIBUTION

C. LEINER, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 BERING RD.

City OCEAN CITY State MD Zip Code 21842-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CANDY KITCHEN SHOPPES Occupation (for Individual) MERCHANDISER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418088

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 368.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2847 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LELAND, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 LYME ROAD, APT 439

City HANOVER	State NH	Zip Code 03755-1236
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364321

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. LEMASTERS, KATHLEEN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 LINDEN LANE
3 LINDEN LN

City WYOMING	State OH	Zip Code 45215-4208
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
314.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362372

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LEMASTERS, KATHLEEN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 LINDEN LANE
3 LINDEN LN

City WYOMING	State OH	Zip Code 45215-4208
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
314.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405832

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2848 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEMASTERS, KATHLEEN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 LINDEN LANE
 3 LINDEN LN
 City WYOMING State OH Zip Code 45215-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405835
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEMBO, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 ESCOBAR AVE.
 City LADY LAKE State FL Zip Code 32159-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390756
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEMBO, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 ESCOBAR AVE.
 City LADY LAKE State FL Zip Code 32159-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418444
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2849 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEMBO, LORETTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 ESCOBAR AVE.

City LADY LAKE	State FL	Zip Code 32159-9524
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422523

Amount of Each Receipt this Period
80.00

Memo Item
CONTRIBUTION

B. LEMBO, LORETTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 ESCOBAR AVE.

City LADY LAKE	State FL	Zip Code 32159-9524
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422527

Amount of Each Receipt this Period
80.00

Memo Item
CONTRIBUTION

C. LEMIEUX, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25101 BUCKSKIN

City LAGUNA HILLS	State CA	Zip Code 92653-5738
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISLES RANCH PARTNERS	Occupation (for Individual) FINANCE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352398

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2850 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEMIEUX, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25101 BUCKSKIN
 City LAGUNA HILLS State CA Zip Code 92653-5738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLES RANCH PARTNERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375892
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEMIEUX, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25101 BUCKSKIN
 City LAGUNA HILLS State CA Zip Code 92653-5738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISLES RANCH PARTNERS Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401485
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEMUNYON, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 NEW JERSEY AVE NW STE 900
 City WASHINGTON State DC Zip Code 20001-2271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEMUNYON GROUP LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt **09 / 24 / 2016**
Transaction ID : SA11A.407153
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2851 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LENT, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 DALEVILLE RD

City SYORRS	State CT	Zip Code 06268-1324
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386138

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LENT, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 DALEVILLE RD

City SYORRS	State CT	Zip Code 06268-1324
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398092

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LENT, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 DALEVILLE RD

City SYORRS	State CT	Zip Code 06268-1324
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398111

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2852 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LENT, JOSEPH, , ,

Mailing Address **28 DALEVILLE RD**

City SYORRS	State CT	Zip Code 06268-1324
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.412397

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LENT, JOSEPH, , ,

Mailing Address **28 DALEVILLE RD**

City SYORRS	State CT	Zip Code 06268-1324
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.419379

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEONARD, J., , ,

Mailing Address **1405 GREENBRIAR ROAD**

City LAFAYETTE	State LA	Zip Code 70503-3659
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 20 / 2016

Transaction ID : SA11A.348190

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2853 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEONARD, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5804 RIVER OAKS RD S
 City HARAHAN State LA Zip Code 70123-2155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORCE MULTIPLIER SOLUTIONS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379114
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. LEONARD, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3704 E ALTA RIDGE CT
 City BOISE State ID Zip Code 83716-7122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.370823
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. LEONHARDT, JERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3326 STONESTHROW DRIVE
 City NEWTON State NC Zip Code 28658-8883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379573
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2854 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEOPOLD, GERALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2507 AMHERST DR
 City WICHITA FALLS State TX Zip Code 76308-5327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED SUPERMARKETS Occupation (for Individual) REGISTERED PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382145
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEOPOLD, GERALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2507 AMHERST DR
 City WICHITA FALLS State TX Zip Code 76308-5327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED SUPERMARKETS Occupation (for Individual) REGISTERED PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385036
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEOPOLD, GERALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2507 AMHERST DR
 City WICHITA FALLS State TX Zip Code 76308-5327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED SUPERMARKETS Occupation (for Individual) REGISTERED PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407906
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2855 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEROY, GARY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4158 QUAKER HILL DRIVE
 City FORT GRATIOT State MI Zip Code 48059-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397028
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LESKO, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 MAXWELL. LN 420
 City HOBOKEN State NJ Zip Code 07030-6882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405534
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LESTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6100 JESSIE HARBOR DR 303
 City OSPREY State FL Zip Code 34229-2114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357417
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2856 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LESTER, DANIEL, , ,

Mailing Address 6100 JESSIE HARBOR DR
303

City OSPREY State FL Zip Code 34229-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016

Transaction ID : SA11A.366651

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LESTER, DANIEL, , ,

Mailing Address 6100 JESSIE HARBOR DR
303

City OSPREY State FL Zip Code 34229-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.394051

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LESTER, DANIEL, , ,

Mailing Address 6100 JESSIE HARBOR DR
303

City OSPREY State FL Zip Code 34229-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : SA11A.396805

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2857 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LESTER, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6100 JESSIE HARBOR DR
303

City OSPREY State FL Zip Code 34229-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.405070

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LESTER, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6100 JESSIE HARBOR DR
303

City OSPREY State FL Zip Code 34229-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.410294

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LETENDRE, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 LITTLE HARBOR RD

City NEW CASTLE State NH Zip Code 03854-9702

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREENERD PRESS & MACHINE Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.357593

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2858 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LETENDRE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 LITTLE HARBOR RD
 City NEW CASTLE State NH Zip Code 03854-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENERD PRESS & MACHINE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385201
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. LETOURNEAU, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 POLK DR
 City NOBLESVILLE State IN Zip Code 46062-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349703
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. LETOURNEAU, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 POLK DR
 City NOBLESVILLE State IN Zip Code 46062-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359739
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2859 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LETOURNEAU, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 POLK DR
 City NOBLESVILLE State IN Zip Code 46062-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.375051
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LETOURNEAU, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 POLK DR
 City NOBLESVILLE State IN Zip Code 46062-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.375076
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LETOURNEAU, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5627 POLK DR
 City NOBLESVILLE State IN Zip Code 46062-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405243
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2860 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEUENBERGER, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 YELLOW CREEK RD
 City AKRON State OH Zip Code 44333-2221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418162
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350448
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355368
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2861 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355377
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355379
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370095
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2862 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376112
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400851
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407623
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2863 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVENGOOD, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 WHISPERING PINES LANE
 City BIRDSBORO State PA Zip Code 19508-7934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CJ'S TIRE AUTO Occupation (for Individual) TIRE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407631
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEVINE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 NORTH BROADWAY
 City NYACK State NY Zip Code 10960-2624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383138
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LEVINE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO817
 City RANCHO SANTA FE State CA Zip Code 92067-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 709.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359928
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 431.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2864 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVINE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO817
 City RANCHO SANTA FE State CA Zip Code 92067-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 709.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384799
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

B. LEVINE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO817
 City RANCHO SANTA FE State CA Zip Code 92067-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 709.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419609
 Amount of Each Receipt this Period
 131.00
 Memo Item
 CONTRIBUTION

C. LEVIN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12274 1ST ST. W. #2
 City T REASURE ISLAND State FL Zip Code 33706-5164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES & MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362326
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 362.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2865 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVIN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12274 1ST ST. W.
 #2
 City T REASURE ISLAND State FL Zip Code 33706-5164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370743
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEVIN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12274 1ST ST. W.
 #2
 City T REASURE ISLAND State FL Zip Code 33706-5164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES & MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.416833
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. LEVIN, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 ROYAL VIEW ROAD
 City ESCONDIDO State CA Zip Code 92027-4757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LASERFLOW PRODUCTS, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2866 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016
Transaction ID : SA11A.347693
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.361213
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378206
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2867 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383257
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396439
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LEVNO, SELMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 7TH AVENUE SW
 City SIDNEY State MT Zip Code 59270-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406727
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2868 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVY, IRWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 UPTOWN PARK BLVD #64
 City HOUSTON State TX Zip Code 77056-3245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411107
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. LEVY, RACHEL, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 SAMANTHAS WAY
 City PITTSFORD State NY Zip Code 14534-1085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.358444
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LEVY, RACHEL, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 SAMANTHAS WAY
 City PITTSFORD State NY Zip Code 14534-1085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.358445
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2869 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVY, RACHEL, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 SAMANTHAS WAY

City PITTSFORD	State NY	Zip Code 14534-1085
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359754

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LEVY, RACHEL, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 SAMANTHAS WAY

City PITTSFORD	State NY	Zip Code 14534-1085
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405485

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LEWIS, DAVID, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15319 SW ASHLEY DR

City TIGARD	State OR	Zip Code 97224-1568
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSONUS PHARMACY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.381557

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2870 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS JR', DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350341
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. LEWIS JR', DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359487
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEWIS, DONALD, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6630 TUNLAW COURT
 City ALEXANDRIA State VA Zip Code 22312-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378261
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2871 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13700 LYNHURST DR
 City DALE CITY State VA Zip Code 22193-4333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349374
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. LEWIS, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13700 LYNHURST DR
 City DALE CITY State VA Zip Code 22193-4333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374667
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. LEWIS, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13700 LYNHURST DR
 City DALE CITY State VA Zip Code 22193-4333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399702
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2872 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, GUY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3167 E 87TH STREET
City TULSA State OK Zip Code 74137-2524
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) GUY LEWIS INC Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362784
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LEWIS, JENNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3197 HARVEST MOON DRIVE
City PALM HARBOR State FL Zip Code 34683-2125
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FIS Occupation (for Individual) SR. DIRECTOR
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359686
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LEWIS, JENNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3197 HARVEST MOON DRIVE
City PALM HARBOR State FL Zip Code 34683-2125
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) FIS Occupation (for Individual) SR. DIRECTOR
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386900
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2873 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, JENNY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683-2125
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) SR. DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.419497

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LEWIS, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 548 HUNTERS RUN

City BLUFFTON	State OH	Zip Code 45817-1233
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPEEDY ARCHES	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016

Transaction ID : SA11A.359958

Amount of Each Receipt this Period
131.00

Memo Item CONTRIBUTION

C. LEWIS, MARTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 MIDDLE ROAD
APT 368

City BRYN MAWR	State PA	Zip Code 19010-1780
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016

Transaction ID : SA11A.365404

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	356.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2874 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 MIDDLE ROAD
 APT 368
 City BRYN MAWR State PA Zip Code 19010-1780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375162
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ELK POINTE LN.
 City CASTLE ROCK State CO Zip Code 80108-9166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347305
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ELK POINTE LN.
 City CASTLE ROCK State CO Zip Code 80108-9166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349900
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2875 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ELK POINTE LN.
 City CASTLE ROCK State CO Zip Code 80108-9166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356278
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ELK POINTE LN.
 City CASTLE ROCK State CO Zip Code 80108-9166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.362951
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ELK POINTE LN.
 City CASTLE ROCK State CO Zip Code 80108-9166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383074
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2876 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ELK POINTE LN.
 City CASTLE ROCK State CO Zip Code 80108-9166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016
Transaction ID : SA11A.389106
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 489
 City VANCOUVER State WA Zip Code 98666-0489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLUMBIA VISTA CORP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391331
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. LEWIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 ELK POINTE LN.
 City CASTLE ROCK State CO Zip Code 80108-9166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411316
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2877 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352677
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388177
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422375
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2878 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422525
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LEWIS, SALLY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12135 STEVENS CT
 City LIVE OAK State TX Zip Code 78233-4257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422528
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. LEWIS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 PROCTOR AVE
 City OAKLAND State CA Zip Code 94618-2546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHEN B LEWIS, M.D. Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372404
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2879 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, VERNON, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 E SANTA CRUZ DR

City GOODYEAR State AZ Zip Code 85338-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERN LEWIS WELDING SP INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.348180

Amount of Each Receipt this Period 35.00

Memo Item CONTRIBUTION

B. LEWIS, VERNON, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 E SANTA CRUZ DR

City GOODYEAR State AZ Zip Code 85338-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERN LEWIS WELDING SP INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.361008

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. LEWIS, VERNON, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 E SANTA CRUZ DR

City GOODYEAR State AZ Zip Code 85338-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERN LEWIS WELDING SP INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377644

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 135.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2880 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, VERNON, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 E SANTA CRUZ DR
 City GOODYEAR State AZ Zip Code 85338-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERN LEWIS WELDING SP INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401069
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEWIS, VERNON, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 E SANTA CRUZ DR
 City GOODYEAR State AZ Zip Code 85338-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERN LEWIS WELDING SP INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414597
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LEWIS, VERNON, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 E SANTA CRUZ DR
 City GOODYEAR State AZ Zip Code 85338-1429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERN LEWIS WELDING SP INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414743
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2881 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2251 LASATER BLVD
 City EUGENE State OR Zip Code 97405-1759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384680
 Amount of Each Receipt this Period
 2000.00
 Memo Item CONTRIBUTION

B. LEWIT, ROBERT, T., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2120 HARBOURSIDE DRIVE UNIT 633
 City LONGBOAT KEY State FL Zip Code 34228-4263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2016
Transaction ID : SA11A.346971
 Amount of Each Receipt this Period
 2500.00
 Memo Item CONTRIBUTION

C. LEWIT, ROBERT, T., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2120 HARBOURSIDE DRIVE UNIT 633
 City LONGBOAT KEY State FL Zip Code 34228-4263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387281
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2882 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIT, ROBERT, T., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2120 HARBOURSIDE DRIVE
UNIT 633

City LONGBOAT KEY State FL Zip Code 34228-4263

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4350.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.418198

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LEWIT, ROBERT, T., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2120 HARBOURSIDE DRIVE
UNIT 633

City LONGBOAT KEY State FL Zip Code 34228-4263

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4350.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.418804

Amount of Each Receipt this Period
1500.00

Memo Item CONTRIBUTION

C. LEWIT, WILLIAM, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 VALLEY RD

City SCARSDALE State NY Zip Code 10583-1126

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
07 / 18 / 2016
Transaction ID : SA11A.348598

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2883 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIT, WILLIAM, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 VALLEY RD

City SCARSDALE	State NY	Zip Code 10583-1126
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348615

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LEWIT, WILLIAM, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 VALLEY RD

City SCARSDALE	State NY	Zip Code 10583-1126
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370423

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LEWIT, WILLIAM, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 VALLEY RD

City SCARSDALE	State NY	Zip Code 10583-1126
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386521

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2884 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIT, WILLIAM, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 VALLEY RD
 City SCARSDALE State NY Zip Code 10583-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394464
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEWIT, WILLIAM, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 VALLEY RD
 City SCARSDALE State NY Zip Code 10583-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401327
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LEWIT, WILLIAM, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 VALLEY RD
 City SCARSDALE State NY Zip Code 10583-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418167
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2885 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEYENDEKKER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9001 AVENUE 360

City VISALIA	State CA	Zip Code 93291-8947
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2085.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.369462

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. LEYENDEKKER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9001 AVENUE 360

City VISALIA	State CA	Zip Code 93291-8947
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2085.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.369492

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. LIANG, DAVID, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 ELMHURST DRIVE

City SAN FRANCISCO	State CA	Zip Code 94132-2015
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KZ TILE CO	Occupation (for Individual) CONSTRUCTION MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016

Transaction ID : SA11A.392586

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2886 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIANG, DAVID, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 ELMHURST DRIVE
 City SAN FRANCISCO State CA Zip Code 94132-2015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KZ TILE CO Occupation (for Individual) CONSTRUCTION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414367
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LIBBY, HAROLD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 S ORANGE AV
 City SARASOTA State FL Zip Code 34239-2028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355265
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LICHTENSTEIN, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 FINCH FOREST TR
 City ATLANTA State GA Zip Code 30327-4576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRENMAR CORP Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379839
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2887 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LICHTENBERGER, H. WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 508 NW WINTERS CREEK ROAD

City PALM CITY	State FL	Zip Code 34990-8096
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016
Transaction ID : SA11A.379522

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. LIEBERT, CARL, C., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 LAMONT AVE

City SAN ANTONIO	State TX	Zip Code 78209-3643
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAA	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2016
Transaction ID : SA11A.360256

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. LIEBEL, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 505 FAIRHILL ST

City WILLOW GROVE	State PA	Zip Code 19090-2607
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016
Transaction ID : SA11A.357204

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2888 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIEBEL, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 FAIRHILL ST

City WILLOW GROVE	State PA	Zip Code 19090-2607
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380090

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LIEBEL, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 FAIRHILL ST

City WILLOW GROVE	State PA	Zip Code 19090-2607
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398925

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LIEBEL, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 FAIRHILL ST

City WILLOW GROVE	State PA	Zip Code 19090-2607
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412501

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2889 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIEW, JOHN, M.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GREENWICH PLAZA
 City GREENWICH State CT Zip Code 06830-6353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 41400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421184
 Amount of Each Receipt this Period
 41400.00
 Memo Item
 CONTRIBUTION

B. LIGHT, WALTER, S., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 541674
 City HOUSTON State TX Zip Code 77254-1674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THUNDER EXPLORATION INC. Occupation (for Individual) OIL & GAS GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3084.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350889
 Amount of Each Receipt this Period
 334.00
 Memo Item
 CONTRIBUTION

C. LIGHT, WALTER, S., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 541674
 City HOUSTON State TX Zip Code 77254-1674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THUNDER EXPLORATION INC. Occupation (for Individual) OIL & GAS GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3084.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368485
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	44234.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2890 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LILAK, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 DUNSTANS PASS
 City MARIETTA State GA Zip Code 30066-8543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417754
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. LILLARD, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1340 N WAUKEGAN ROAD
 City LAKE FOREST State IL Zip Code 60045-1147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354426
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. LILLY, GEORGE, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1482 E. VALLEY ROAD, STE 712 SUITE 714
 City MONTECITO State CA Zip Code 93108-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SJL BROADCAST MGMT CORP Occupation (for Individual) BROADCASTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408789
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2891 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIN, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HARVEST WAY
 City BASKING RIDGE State NJ Zip Code 07920-3450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANAGER Occupation (for Individual) NOVOSYS HEALTH LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405033
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LINCOLN, EVE LYNN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S YOSEMITE STREET, SUITE 828
 City DENVER State CO Zip Code 80237-1830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PR MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380902
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LINCOLN, EVE LYNN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S YOSEMITE STREET, SUITE 828
 City DENVER State CO Zip Code 80237-1830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PR MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400717
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2892 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINCOLN, EVE LYNN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S YOSEMITE STREET, SUITE 828
 City DENVER State CO Zip Code 80237-1830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PR MGR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411732
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LINCOLN, EVE LYNN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 S YOSEMITE STREET, SUITE 828
 City DENVER State CO Zip Code 80237-1830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSCHETTER HAMRICK SULZER Occupation (for Individual) CLIENT & PR MGR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411739
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 574.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344509
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2893 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344510
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

B. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348470
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383145
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	182.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2894 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383146
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387972
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LINDEE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 PINE LANE
 City LOS ALTOS State CA Zip Code 94022-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409264
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2895 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDIG, LARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11600 ARGONNE FOREST TRAIL A

City AUSTIN	State TX	Zip Code 78759-2226
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LARK LINDIG	Occupation (for Individual) SELF
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354498

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LINDIG, LARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11600 ARGONNE FOREST TRAIL A

City AUSTIN	State TX	Zip Code 78759-2226
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LARK LINDIG	Occupation (for Individual) SELF
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380016

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. LINDIG, LARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11600 ARGONNE FOREST TRAIL A

City AUSTIN	State TX	Zip Code 78759-2226
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LARK LINDIG	Occupation (for Individual) SELF
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408685

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2896 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDMARK, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address W10079 STROIKA LN
City CRIVITZ State WI Zip Code 54114-8203
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.396689
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LINDNER, IVAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 313 NE 5TH ST.
City OAK GROVE State MO Zip Code 64075-9107
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.357781
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LINDNER, IVAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 313 NE 5TH ST.
City OAK GROVE State MO Zip Code 64075-9107
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383087
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2897 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDNER, IVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 NE 5TH ST.
 City OAK GROVE State MO Zip Code 64075-9107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411267
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LINDNER, THADDEUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8300 BURDETTE ROAD APT 644
 City BETHESDA State MD Zip Code 20817-2836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.396010
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LINDSAY, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1932 HICKORY GLEN ROAD
 City KNOXVILLE State TN Zip Code 37932-1952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINDSAY&MAPLES Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400948
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1550.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2898 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDSEY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12416 WILLOW HILL DR

City MOORPARK	State CA	Zip Code 93021-2764
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SECURITIES AMERICA	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352577

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LINDSEY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12416 WILLOW HILL DR

City MOORPARK	State CA	Zip Code 93021-2764
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SECURITIES AMERICA	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413655

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. LINDSAY, JULIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 81 CHANNING ROAD

City WATERTOWN	State MA	Zip Code 02472-3337
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EASTERN BANK	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.373472

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2899 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINDSEY, MACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 CEDAR CREST DRIVE
 City AUSTIN State TX Zip Code 78750-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362821
 Amount of Each Receipt this Period 800.00
 Memo Item CONTRIBUTION

B. LINGER, AVIS, D., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 TERRACE AVENUE
 City WESTON State WV Zip Code 26452-1539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364332
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LINGE, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 1ST AVENUE NE
 City CEDAR RAPIDS State IA Zip Code 52402-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEDAR MEMORIAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411671
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2900 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINGLE, JR., ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 WINTERGATE CT

City JOHNS CREEK	State GA	Zip Code 30022-5584
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OFS FITEL, LLC	Occupation (for Individual) DIRECTOR OF MARKETING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398899

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LINGLE, JR., ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 WINTERGATE CT

City JOHNS CREEK	State GA	Zip Code 30022-5584
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OFS FITEL, LLC	Occupation (for Individual) DIRECTOR OF MARKETING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.411723

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. LINNEBUR, JUDITH, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4804 N CHAPELVIEW ST

City BEL AIRE	State KS	Zip Code 67226-8931
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2016

Transaction ID : SA11A.354580

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2901 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINNEBUR, JUDITH, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4804 N CHAPELVIEW ST
City BEL AIRE State KS Zip Code 67226-8931
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379070
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LINNEBUR, JUDITH, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4804 N CHAPELVIEW ST
City BEL AIRE State KS Zip Code 67226-8931
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409022
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LINZNER, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1515 ROLLING GREEN ROAD
City YARDLEY State PA Zip Code 19067-2617
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358959
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2902 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINZNER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 ROLLING GREEN ROAD
 City YARDLEY State PA Zip Code 19067-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.383239
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. LINZNER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 ROLLING GREEN ROAD
 City YARDLEY State PA Zip Code 19067-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.383240
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. LINZNER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 ROLLING GREEN ROAD
 City YARDLEY State PA Zip Code 19067-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.383241
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2903 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINZNER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 ROLLING GREEN ROAD
 City YARDLEY State PA Zip Code 19067-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409115
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LINZNER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 ROLLING GREEN ROAD
 City YARDLEY State PA Zip Code 19067-2617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409117
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LIONETT, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11157 SIERRA PALM COURT
 City FORT MYERS State FL Zip Code 33966-5754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357530
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2904 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIONETT, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11157 SIERRA PALM COURT
 City FORT MYERS State FL Zip Code 33966-5754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382774
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LIONETT, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11157 SIERRA PALM COURT
 City FORT MYERS State FL Zip Code 33966-5754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LIPPINCOTT, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 WILDWOOD DR
 City NEW SMYRNA BEACH State FL Zip Code 32168-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347793
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2905 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPPINCOTT, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 WILDWOOD DR
 City NEW SMYRNA BEACH State FL Zip Code 32168-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348512
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LIPPINCOTT, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 WILDWOOD DR
 City NEW SMYRNA BEACH State FL Zip Code 32168-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350177
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LIPPINCOTT, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 WILDWOOD DR
 City NEW SMYRNA BEACH State FL Zip Code 32168-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365222
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2906 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPPINCOTT, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 WILDWOOD DR
 City NEW SMYRNA BEACH State FL Zip Code 32168-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379655
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LIPPINCOTT, DALLAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 WILDWOOD DR
 City NEW SMYRNA BEACH State FL Zip Code 32168-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386656
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2907 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350179
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350183
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357339
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2908 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357348
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357349
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357655
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2909 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 08 / 01 / 2016
Transaction ID : SA11A.358981
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380641
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384526
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2910 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384533
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387352
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390418
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2911 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390419
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394316
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394320
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2912 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394338
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394342
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LIPSEY, SUZANNE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397853
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2913 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LISTER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2674 PROVENCIAL LANE

City RICHARDSON	State TX	Zip Code 75080-1673
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2016

Transaction ID : SA11A.390790

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. LITOW, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5700 SEA VIEW DR

City MALIBU	State CA	Zip Code 90265-3762
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2016

Transaction ID : SA11A.355673

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. LITOW, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5700 SEA VIEW DR

City MALIBU	State CA	Zip Code 90265-3762
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2016

Transaction ID : SA11A.408552

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2914 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LITTLE, DAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 618

City MADILL	State OK	Zip Code 73446-0618
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LITTLE LAW FRIM	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.396056

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LITTLE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 911 KAGAWA STREET

City PACIFIC PALISADES	State CA	Zip Code 90272-3834
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357677

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. LITTLE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 911 KAGAWA STREET

City PACIFIC PALISADES	State CA	Zip Code 90272-3834
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406089

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2915 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LITTLE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 911 KAGAWA STREET
City PACIFIC PALISADES State CA Zip Code 90272-3834
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406091
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LITTON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19 CHAMPION VILLA DRIVE
City HOUSTON State TX Zip Code 77069-1422
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394884
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LIVANOS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 190 EAST 72ND ST
City NEW YORK State NY Zip Code 10021-4370
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SCIO SHIPPING, INC. Occupation (for Individual) SHIPBROKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359520
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2916 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIVENGOOD, RICHARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 221558
 City EL PASO State TX Zip Code 79913-4558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 20 / 2016**
Transaction ID : SA11A.376051
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LIVINGSTONE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BALFOUR DRIVE
 City WEST HARTFORD State CT Zip Code 06117-2901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PNL LLP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.394643
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LIZAU, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11571 BUENA VISTA DRIVE
 City LOS ALTOS HILLS State CA Zip Code 94022-4246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.406520
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2917 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIZZA, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 N. CONGRESS AVE

City WEST PALM BEACH	State FL	Zip Code 33409-5307
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONROES OF PALM BEACH	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355672

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. LLOYD, ROSALIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1610 MANOR DRIVE NE

City CULLMAN	State AL	Zip Code 35055-2140
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380672

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LLOYD, ROSALIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1610 MANOR DRIVE NE

City CULLMAN	State AL	Zip Code 35055-2140
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.387117

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2918 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LLOYD, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 MANOR DRIVE NE
 City CULLMAN State AL Zip Code 35055-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398046
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LLOYD, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 MANOR DRIVE NE
 City CULLMAN State AL Zip Code 35055-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398047
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LLOYD, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 MANOR DRIVE NE
 City CULLMAN State AL Zip Code 35055-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403502
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2919 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, ROSALIE, , ,

Mailing Address 1610 MANOR DRIVE NE

City CULLMAN	State AL	Zip Code 35055-2140
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.417621

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, ROSALIE, , ,

Mailing Address 1610 MANOR DRIVE NE

City CULLMAN	State AL	Zip Code 35055-2140
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.417639

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, ROSALIE, , ,

Mailing Address 1610 MANOR DRIVE NE

City CULLMAN	State AL	Zip Code 35055-2140
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.418108

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2920 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LLOYD, ROSALIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1610 MANOR DRIVE NE
City CULLMAN State AL Zip Code 35055-2140
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418324
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LOBDELL, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3420 MAPLE AVENUE
City PULASKI State NY Zip Code 13142-4502
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) HEALTHWAY PRODUCTS INC. Occupation (for Individual) CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411385
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LOCKE, JOHN, R., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 W HOUSTON STREET SUITE 1452A
City SAN ANTONIO State TX Zip Code 78205-1490
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370209
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2921 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOCKE, JOHN, R., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 W HOUSTON STREET
 SUITE 1452A
 City SAN ANTONIO State TX Zip Code 78205-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370211
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOCKE, JOHN, R., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 W HOUSTON STREET
 SUITE 1452A
 City SAN ANTONIO State TX Zip Code 78205-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370213
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOCKE, JOHN, R., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 W HOUSTON STREET
 SUITE 1452A
 City SAN ANTONIO State TX Zip Code 78205-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370215
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2922 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOCKE, JOHN, R., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 W HOUSTON STREET
 SUITE 1452A
 City SAN ANTONIO State TX Zip Code 78205-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399383
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOCKHART, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 ALDEN RD
 City GREENWICH State CT Zip Code 06831-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WL ROSS & CO Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401046
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. LOCKHART, LEMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7211 LAKEWOOD DR.
 136
 City AUSTIN State TX Zip Code 78750-8281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344419
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10132.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2923 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOCKHART, LEMUUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7211 LAKEWOOD DR.
 136
 City AUSTIN State TX Zip Code 78750-8281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352307
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LOCKHART, LEMUUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7211 LAKEWOOD DR.
 136
 City AUSTIN State TX Zip Code 78750-8281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359392
 Amount of Each Receipt this Period
 38.00
 Memo Item
 CONTRIBUTION

C. LOCKHART, LEMUUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7211 LAKEWOOD DR.
 136
 City AUSTIN State TX Zip Code 78750-8281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359395
 Amount of Each Receipt this Period
 38.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	101.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2924 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LOCKHART, LEMUUEL, , ,

Mailing Address 7211 LAKEWOOD DR.
136

City AUSTIN State TX Zip Code 78750-8281

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016

Transaction ID : SA11A.359401

Amount of Each Receipt this Period
38.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LOCKMILLER, DEANNA, , ,

Mailing Address 2530 SR 311

City CLOVIS State NM Zip Code 88101-1227

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.350326

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LOCKMILLER, DEANNA, , ,

Mailing Address 2530 SR 311

City CLOVIS State NM Zip Code 88101-1227

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.350329

Amount of Each Receipt this Period
54.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 117.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2925 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOCKMILLER, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 SR 311
 City CLOVIS State NM Zip Code 88101-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356234
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. LOCKMILLER, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 SR 311
 City CLOVIS State NM Zip Code 88101-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368450
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LOCKMILLER, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 SR 311
 City CLOVIS State NM Zip Code 88101-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt **08 / 20 / 2016**
Transaction ID : SA11A.376145
 Amount of Each Receipt this Period 54.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	131.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2926 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOCKMILLER, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 SR 311
 City CLOVIS State NM Zip Code 88101-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400877
 Amount of Each Receipt this Period 54.00
 Memo Item CONTRIBUTION

B. LOCKYER, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331C PENN ROAD
 City WYNNEWOOD State PA Zip Code 19096-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS WYNNE LP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351018
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LOEB, DANIEL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 CENTRAL PARK W PENTHOUSE 39
 City NEW YORK State NY Zip Code 10023-7719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIRD POINT LLC Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385244
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25304.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2927 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOEB, HAROM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2024 E WINTERGREEN AVENUE
 City MOUNT PROSPECT State IL Zip Code 60056-1742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383453
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. LOEFFLER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22120 WORCESTER DR.
 City NOVI State MI Zip Code 48374-3957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355740
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LOEFFLER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22120 WORCESTER DR.
 City NOVI State MI Zip Code 48374-3957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380708
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2928 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOEFFLER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22120 WORCESTER DR.
 City NOVI State MI Zip Code 48374-3957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.408021
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LOFGREN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 147
 City TAYLOR State WI Zip Code 54659-0147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENLEAF TRUCKING INC Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348895
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. LOFTUS, SHEILA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 COUNTY ROAD 100 E
 City IVESDALE State IL Zip Code 61851-9714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2016
Transaction ID : SA11A.346020
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2929 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOFTUS, SHEILA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 COUNTY ROAD 100 E
 City IVESDALE State IL Zip Code 61851-9714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361516
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. LOFTUS, SHEILA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 COUNTY ROAD 100 E
 City IVESDALE State IL Zip Code 61851-9714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391425
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LOFTUS, SHEILA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 COUNTY ROAD 100 E
 City IVESDALE State IL Zip Code 61851-9714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401109
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2930 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOFTUS, SHEILA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 COUNTY ROAD 100 E
 City IVESDALE State IL Zip Code 61851-9714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414492
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. LOGAN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 99
 City EARLYSVILLE State VA Zip Code 22936-0099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379679
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LOGAN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 FOX RUN ROAD
 City FINDLAY State OH Zip Code 45840-7436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLANCHARD VALLEY HEALTH SYSTEM Occupation (for Individual) PHYSICAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396989
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1285.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2931 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOGOTHETIS, MARIE, C., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 THE SERPENTINE
 City ROSLYN State NY Zip Code 11576-1711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MON Occupation (for Individual) INTERIOR DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345832
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. LOIKITS, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 COMFORT CIRCLE
 City BETHLEHEM State PA Zip Code 18017-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357574
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOIKITS, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 COMFORT CIRCLE
 City BETHLEHEM State PA Zip Code 18017-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382809
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2932 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOISELLE, SANDRA, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4458 SMOKEY MOUNTAIN TRAIL
 City COLUMBUS State GA Zip Code 31907-1752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 02 / 2016**
Transaction ID : SA11A.360105
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. LOISELLE, SANDRA, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4458 SMOKEY MOUNTAIN TRAIL
 City COLUMBUS State GA Zip Code 31907-1752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407068
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LOKBOJ, JORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 KUKUOI STREET
 City KUHULUI State HI Zip Code 96732-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381504
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2933 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOKBOJ, JORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 KUKUOI STREET
 City KUHULUI State HI Zip Code 96732-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381505
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. LOMEQ, JODY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6150 WALNUT CREEK CT
 City EAST AMHERST State NY Zip Code 14051-1954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 LPL FINANCIAL OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.383559
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. LONERGAN, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5115 52ND ST NW
 City WASHINGTON State DC Zip Code 20016-4379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 MERCURY PUBLIC STRATEGY GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421199
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2934 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONEY, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1302 FERNWOOD CIR NE

City BROOKHAVEN	State GA	Zip Code 30319-3408
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STRONGHAVEN INC	Occupation (for Individual) VP MANUFACTURING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399787

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. LONG, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 80 WESTWIND DRIVE

City JAMESTOWN	State RI	Zip Code 02835-1001
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CAR DEALER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.406492

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. LONG, CHRISTINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16 BRIARCLIFF DR.

City ASHEVILLE	State NC	Zip Code 28803-3303
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415283

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2935 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18314 EDWARDS OAKS
 City SAN ANTONIO State TX Zip Code 78259-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386545
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LONG, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 LAKE DRIVE
 City VERO BEACH State FL Zip Code 32963-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408342
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LONG, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18314 EDWARDS OAKS
 City SAN ANTONIO State TX Zip Code 78259-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419385
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2936 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7940 SPENCER LAKE ROAD
 City MEDINA State OH Zip Code 44256-9193
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372445
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LONG, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 WALNUT RIDGE COURT
 City CHARLOTTESVILLE State VA Zip Code 22911-8222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397347
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LONG, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1270
 City MIDLAND State TX Zip Code 79702-1270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTEX WELL SERVICES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 80000.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346070
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10750.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2937 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONG, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1270
 City MIDLAND State TX Zip Code 79702-1270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTEX WELL SERVICES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 80000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364261
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. LONG, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1270
 City MIDLAND State TX Zip Code 79702-1270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTEX WELL SERVICES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 80000.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.391606
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. LONG, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1236 W 55TH
 City KC State MO Zip Code 64113-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380652
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 20250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2938 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LONGO, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 MORRIS AVE
 City BUFFALO State NY Zip Code 14214-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLOCK & LONGO P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.393897
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LOO, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2337
 City COLORADO SPRINGS State CO Zip Code 80901-2337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH VALLEY GROUP Occupation (for Individual) PHILANTHROPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362828
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LOOS, JANET, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CLUBHOUSE DRIVE APT 265
 City NAPLES State FL Zip Code 34105-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357847
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2939 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LORENSEN, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 260 W KEY PALM ROAD

City BOCA RATON	State FL	Zip Code 33432-7924
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LORSENSEN ENTERPRISES	Occupation (for Individual) AUTO DEALER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379683

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. LORING, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 622 NORTH FLAGLER DR
1001

City WEST PALM BEACH	State FL	Zip Code 33401-4010
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380857

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LORING, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 622 NORTH FLAGLER DR
1001

City WEST PALM BEACH	State FL	Zip Code 33401-4010
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.389356

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2940 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LORING, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 NORTH FLAGLER DR
 1001
 City WEST PALM BEACH State FL Zip Code 33401-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403938
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LOSELY, GERTRUDE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4725 LANE ROAD
 City PERRY State OH Zip Code 44081-9660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERMAN LOSELY & SON INC Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354234
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. LOSH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 50368
 City PASADENA State CA Zip Code 91115-0368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.366468
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2941 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOTHIAN, JUDITH, , ,

Mailing Address **650 76 ST**

City BROOKLYN	State NY	Zip Code 11209-3326
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SETON HALL UNIVERSITY	Occupation (for Individual) PROFESSOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
07 / 21 / 2016

Transaction ID : SA11A.351960

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOTHIAN, JUDITH, , ,

Mailing Address **650 76 ST**

City BROOKLYN	State NY	Zip Code 11209-3326
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SETON HALL UNIVERSITY	Occupation (for Individual) PROFESSOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
07 / 22 / 2016

Transaction ID : SA11A.354890

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOTHIAN, JUDITH, , ,

Mailing Address **650 76 ST**

City BROOKLYN	State NY	Zip Code 11209-3326
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SETON HALL UNIVERSITY	Occupation (for Individual) PROFESSOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 21 / 2016

Transaction ID : SA11A.377478

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2942 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTHIAN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 76 ST
 City BROOKLYN State NY Zip Code 11209-3326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SETON HALL UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401470
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOTT, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 S. STERLEY STREET, UNIT 500
 City SHILLINGTON State PA Zip Code 19607-1845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOTT RESTAURANT CONSTRUCTION, LLC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398296
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378790
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2943 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378791
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.405416
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOTT, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5334 HARRIS WOODS TRACE
 City FULSHEAR State TX Zip Code 77441-4381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APACHE Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 24 / 2016**
Transaction ID : SA11A.408981
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2944 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOTTERMOSER, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WEST 5TH STREET
 City ONEIDA State NY Zip Code 13421-2526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347364
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LOTTERMOSER, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WEST 5TH STREET
 City ONEIDA State NY Zip Code 13421-2526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359385
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LOTTERMOSER, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WEST 5TH STREET
 City ONEIDA State NY Zip Code 13421-2526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.401576
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2945 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOUIE, WINDSOR, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1364
 City TUSTIN State CA Zip Code 92781-1364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372474
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOUIE, WINDSOR, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1364
 City TUSTIN State CA Zip Code 92781-1364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376246
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOUIE, WINDSOR, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1364
 City TUSTIN State CA Zip Code 92781-1364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391097
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2946 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOUIE, WINDSOR, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1364
 City TUSTIN State CA Zip Code 92781-1364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416847
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOUIS, EDWARD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 N. WREN AVE
 City PALATINE State IL Zip Code 60067-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391675
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOUIS, EDWARD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 N. WREN AVE
 City PALATINE State IL Zip Code 60067-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401536
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2947 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOUKOS, ISAIAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8419 ROCKY SPRINGS ROAD
 City FREDERICK State MD Zip Code 21702-2385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378417
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LOUNSBERRY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 516 PARK PLACE DR
 City GEORGETOWN State TX Zip Code 78628-6882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386644
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LOVE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8263
 City GREENVILLE State TX Zip Code 75404-8263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L3 Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358279
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2948 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 8263**
City **GREENVILLE** State **TX** Zip Code **75404-8263**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **L3** Occupation (for Individual) **SCIENTIST**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372613
Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

B. LOVE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 8263**
City **GREENVILLE** State **TX** Zip Code **75404-8263**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **L3** Occupation (for Individual) **SCIENTIST**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388651
Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

C. LOVE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 8263**
City **GREENVILLE** State **TX** Zip Code **75404-8263**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **L3** Occupation (for Individual) **SCIENTIST**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.396658
Amount of Each Receipt this Period **50.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2949 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVELLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 VIA PUERTA UNIT N

City LAGUNA WOODS	State CA	Zip Code 92637-2449
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355337

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. LOVELLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 VIA PUERTA UNIT N

City LAGUNA WOODS	State CA	Zip Code 92637-2449
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379825

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. LOVELLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 VIA PUERTA UNIT N

City LAGUNA WOODS	State CA	Zip Code 92637-2449
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379827

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2950 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVELLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 VIA PUERTA UNIT N

City LAGUNA WOODS	State CA	Zip Code 92637-2449
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399314

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LOVELLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 VIA PUERTA UNIT N

City LAGUNA WOODS	State CA	Zip Code 92637-2449
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403874

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. LOVELLE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2115 VIA PUERTA UNIT N

City LAGUNA WOODS	State CA	Zip Code 92637-2449
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403930

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2951 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVELLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 VIA PUERTA UNIT N
 City LAGUNA WOODS State CA Zip Code 92637-2449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422871
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LOVELACE, LORRAINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4974 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348649
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LOVELACE, LORRAINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4974 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348660
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2952 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVELACE, LORRAINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4974 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.378484
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. LOVELACE, LORRAINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4974 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 16 / 2016
Transaction ID : SA11A.398836
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. LOVELACE, LORRAINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4974 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.414751
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2953 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVELASS, THOMAS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3205 WISTERIA LANE
 City BLOOMINGTON State IL Zip Code 61704-2769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375115
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LOVELASS, THOMAS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3205 WISTERIA LANE
 City BLOOMINGTON State IL Zip Code 61704-2769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407080
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LOVO, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5580 LA CUMBRE ROAD
 City SOMIS State CA Zip Code 93066-9784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385750
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2954 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LOVO, PAULA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5580 LA CUMBRE ROAD

City SOMIS	State CA	Zip Code 93066-9784
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391658

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. LOVO, PAULA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5580 LA CUMBRE ROAD

City SOMIS	State CA	Zip Code 93066-9784
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394228

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LOVO, PAULA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5580 LA CUMBRE ROAD

City SOMIS	State CA	Zip Code 93066-9784
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.423088

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2955 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 520
 City BOUNTIFUL State UT Zip Code 84011-0520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375230
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. LOWELL, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 W. 5650 N.
 City SAINT GEORGE State UT Zip Code 84770-5929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 292.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377089
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LOWELL, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 W. 5650 N.
 City SAINT GEORGE State UT Zip Code 84770-5929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 292.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399821
 Amount of Each Receipt this Period 42.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 792.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2956 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOWREY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 BLUE WATER BAY BLVD.
 City KATY State TX Zip Code 77494-6213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENVIRONMENTAL SERVICES PROFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364878
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LOYD, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1150
 City WEST MEMPHIS State AR Zip Code 72303-1150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385992
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LUCAS, CHRISTINE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 VAUCLAIN RD
 City BRYN MAWR State PA Zip Code 19010-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSK Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357626
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2957 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCAS, CHRISTINE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 VAUCLAIN RD
 City BRYN MAWR State PA Zip Code 19010-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSK Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382816
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LUCAS, CHRISTINE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 VAUCLAIN RD
 City BRYN MAWR State PA Zip Code 19010-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSK Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408108
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LUCAS, CHRISTINE, S., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 VAUCLAIN RD
 City BRYN MAWR State PA Zip Code 19010-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSK Occupation (for Individual) IT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413137
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2958 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCHSINGER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 THURSTON ROAD
 City FREDERICK State MD Zip Code 21704-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372635
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LUCHSINGER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 THURSTON ROAD
 City FREDERICK State MD Zip Code 21704-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382504
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LUCHSINGER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 THURSTON ROAD
 City FREDERICK State MD Zip Code 21704-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384510
 Amount of Each Receipt this Period 51.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 126.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2959 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCHSINGER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 THURSTON ROAD
 City FREDERICK State MD Zip Code 21704-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408484
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LUCHSINGER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2750 THURSTON ROAD
 City FREDERICK State MD Zip Code 21704-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412738
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LUCI, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 BENEDICT ROAD
 City STATEN ISLAND State NY Zip Code 10304-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIPEXIM PHARMACEUTICALS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 999.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412973
 Amount of Each Receipt this Period 999.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1124.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2960 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCIANO, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3030 SAVANNAH PL

City VERO BEACH	State FL	Zip Code 32963-4763
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348537

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LUCIANO, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3030 SAVANNAH PL

City VERO BEACH	State FL	Zip Code 32963-4763
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.369087

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. LUCIANO, ROBERY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3030 SAVANAH PL

City VERO BEACH	State FL	Zip Code 32963-4763
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381803

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2961 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUCIANO, ROBERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3030 SAVANAH PL
 City VERO BEACH State FL Zip Code 32963-4763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386769
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LUCIER, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3317 POPPY HILLS LN
 City ENCINITAS State CA Zip Code 92024-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NU VASIVE INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.375450
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. LUCKOCK, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 310
 City SLIPPERY ROCK State PA Zip Code 16057-0310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369282
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50750.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2962 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUDBROOK, ROBERT, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26501 SOMERSET LANE
 City KENT State WA Zip Code 98032-7101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347886
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LUDBROOK, ROBERT, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26501 SOMERSET LANE
 City KENT State WA Zip Code 98032-7101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358679
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LUDBROOK, ROBERT, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26501 SOMERSET LANE
 City KENT State WA Zip Code 98032-7101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389809
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2963 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUDWIG, GLEN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5365 LEROY STREET

City SAN BERNARDINO	State CA	Zip Code 92404-1142
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUDWIG ENGINEERING ASSOC	Occupation (for Individual) CIVIL ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365175

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. LUFKIN, CHAUNCEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2640 LAKE SHORE DRIVE
UNIT 2407

City RIVIERA BEACH	State FL	Zip Code 33404-4674
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397267

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. LUKENS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11713 FAIRFAX WOODS WAY
9206

City FAIRFAX	State VA	Zip Code 22030-8396
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AGC OF AMERICA	Occupation (for Individual) COO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348934

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2964 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUMPKIN, THEODORE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5473 VILLAGE GREEN
 City LOS ANGELES State CA Zip Code 90016-5106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TED LUMPKIN REAL ESTATE Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358539
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LUMPKIN, THEODORE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5473 VILLAGE GREEN
 City LOS ANGELES State CA Zip Code 90016-5106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TED LUMPKIN REAL ESTATE Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401610
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LUNATO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 TAYLOR RD
 City PAINESVILLE State OH Zip Code 44077-9325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 09 / 2016
Transaction ID : SA11A.346703
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2965 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUNATO, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6180 TAYLOR RD

City PAINESVILLE	State OH	Zip Code 44077-9325
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363901

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. LUNATO, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6180 TAYLOR RD

City PAINESVILLE	State OH	Zip Code 44077-9325
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392124

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. LUNATO, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6180 TAYLOR RD

City PAINESVILLE	State OH	Zip Code 44077-9325
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413377

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2966 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUNATO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 TAYLOR RD
 City PAINESVILLE State OH Zip Code 44077-9325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413389
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. LUND, THOMAS, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 FAIRVIEW LANE
 City GARDNERVILLE State NV Zip Code 89460-6506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 699.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369286
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. LUNDQUIST, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6277 NORTH OCEAN BLVD
 City OCEAN RIDGE State FL Zip Code 33435-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383788
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2967 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W. WILDFLOWER DR.

City SANTA FE	State NM	Zip Code 87506-0102
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386712

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. LUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W. WILDFLOWER DR.

City SANTA FE	State NM	Zip Code 87506-0102
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386715

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. LUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W. WILDFLOWER DR.

City SANTA FE	State NM	Zip Code 87506-0102
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407816

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2968 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUNT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 W. WILDFLOWER DR.
 City SANTA FE State NM Zip Code 87506-0102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407817
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LUNT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 W. WILDFLOWER DR.
 City SANTA FE State NM Zip Code 87506-0102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419504
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LUPRIORE, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 DIVISADERO ST
 City SAN FRANCISCO State CA Zip Code 94117-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368372
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2969 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUPRIORE, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 DIVISADERO ST
 City SAN FRANCISCO State CA Zip Code 94117-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368373
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LUPRIORE, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 DIVISADERO ST
 City SAN FRANCISCO State CA Zip Code 94117-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383922
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LUPRIORE, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 DIVISADERO ST
 City SAN FRANCISCO State CA Zip Code 94117-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403349
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2970 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUPRIORE, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 DIVISADERO ST
 City SAN FRANCISCO State CA Zip Code 94117-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403353
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LUSKIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 N. LAKE SHORE DRIVE 1412
 City CHICAGO State IL Zip Code 60611-4546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRENDMACRO Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399432
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LUTHER, TOBY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2700 MELROSE RD
 City ROSEBURG State OR Zip Code 97471-8903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONE ROCK RESOURCES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367897
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2971 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUZI, FRANK, A., DR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9660 ROCKY POINT

City CLARENCE	State NY	Zip Code 14031-1588
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHORATIONS ORTHOPEDICS	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.383553

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. LYDA, MEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80440 RAIL HOLLOW RD

City DUFUR	State OR	Zip Code 97021-3120
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408191

Amount of Each Receipt this Period
201.60

Memo Item
CONTRIBUTION

C. LYLE, CHARLES, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 804 BELL RD

City CHAGRIN FALLS	State OH	Zip Code 44022-4152
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMCO INC	Occupation (for Individual) PRES
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347480

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1251.60
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2972 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYLE, CHARLES, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 804 BELL RD

City CHAGRIN FALLS	State OH	Zip Code 44022-4152
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMCO INC	Occupation (for Individual) PRES
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352194

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. LYLE, CHARLES, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 804 BELL RD

City CHAGRIN FALLS	State OH	Zip Code 44022-4152
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMCO INC	Occupation (for Individual) PRES
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375842

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. LYLE, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7341 ALMADEN LANE

City CARLSBAD	State CA	Zip Code 92009-6902
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358165

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2973 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351933
 Amount of Each Receipt this Period 5.00
 Memo Item
 CONTRIBUTION

B. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351934
 Amount of Each Receipt this Period 18.00
 Memo Item
 CONTRIBUTION

C. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352150
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	48.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2974 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352151
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355318
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375839
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2975 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383571
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383572
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393853
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2976 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394193
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394202
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394204
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2977 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401424
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404491
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LYNCH, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2807 BROWNS LAKE DR
 City BURLINGTON State WI Zip Code 53105-7956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LDV Occupation (for Individual) OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9598.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404492
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2978 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 HEPPLEWHITE WAY

City THE WOODLANDS	State TX	Zip Code 77382-2068
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BP	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358977

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. LYNCH, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5735 GLEN EAGLE LANE

City VERO BEACH	State FL	Zip Code 32967-7549
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.348330

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. LYNCH, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5735 GLEN EAGLE LANE

City VERO BEACH	State FL	Zip Code 32967-7549
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.362982

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2979 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5735 GLEN EAGLE LANE
 City VERO BEACH State FL Zip Code 32967-7549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368777
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LYNCH, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5735 GLEN EAGLE LANE
 City VERO BEACH State FL Zip Code 32967-7549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386117
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. LYNCH, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5735 GLEN EAGLE LANE
 City VERO BEACH State FL Zip Code 32967-7549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394126
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2980 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNCH, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5735 GLEN EAGLE LANE

City VERO BEACH	State FL	Zip Code 32967-7549
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403287

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LYNCH, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5735 GLEN EAGLE LANE

City VERO BEACH	State FL	Zip Code 32967-7549
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403361

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LYNN, MILTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7341 GREENBANK RD

City MIDDLE RIVER	State MD	Zip Code 21220-1115
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2016

Transaction ID : SA11A.366824

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2981 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNN, MILTON, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7341 GREENBANK RD

City MIDDLE RIVER	State MD	Zip Code 21220-1115
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.419159

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. LYNN, MILTON, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7341 GREENBANK RD

City MIDDLE RIVER	State MD	Zip Code 21220-1115
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.419197

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. LYNN, MILTON, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7341 GREENBANK RD

City MIDDLE RIVER	State MD	Zip Code 21220-1115
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.419202

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2982 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYNN, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7341 GREENBANK RD
 City MIDDLE RIVER State MD Zip Code 21220-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422436
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LYNNER, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2930 BELL AVENUE
 City DES MOINES State IA Zip Code 50321-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401779
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. LYONS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 GRAYBAR LN
 City NASHVILLE State TN Zip Code 37215-2104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METROPOLITAN BANK Occupation (for Individual) SENIOR MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370526
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2983 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYONS, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1014 SEA LANE
 City CORONA DEL MAR State CA Zip Code 92625-1540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397045
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

B. LYONS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 SPINNAKER WAY
 City CORONADO State CA Zip Code 92118-3265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365187
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. LYONS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 SPINNAKER WAY
 City CORONADO State CA Zip Code 92118-3265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392494
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2984 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYSINGER, ROSE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2023 TOULON LANE
 City CARROLLTON State TX Zip Code 75007-2204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417179
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. LYSKANYCZ, MYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6535 N WAUKESHA AVENUE
 City CHICAGO State IL Zip Code 60646-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364500
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LYSKANYCZ, MYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6535 N WAUKESHA AVENUE
 City CHICAGO State IL Zip Code 60646-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406677
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2985 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LYTELL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18301 GLADES FARM ROAD
 City ESTERO State FL Zip Code 33928-9606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM LYTELL MARBLE RESTORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386561
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. LYTELL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18301 GLADES FARM ROAD
 City ESTERO State FL Zip Code 33928-9606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM LYTELL MARBLE RESTORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.409333
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. M<CCARTHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47802 270TH ST
 City SIOUX FALLS State SD Zip Code 57108-8223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 07 / 21 / 2016
Transaction ID : SA11A.352365
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2986 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. M<CCARTHY, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47802 270TH ST

City SIOUX FALLS	State SD	Zip Code 57108-8223
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375931

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. M<CCARTHY, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47802 270TH ST

City SIOUX FALLS	State SD	Zip Code 57108-8223
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401451

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MA, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8400 WESTPARK DR.
118

City MCLEAN	State VA	Zip Code 22102-5116
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA UNIVERSITY OF SCIENCE & TECHN	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Transaction ID : SA11A.362066

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2987 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MA, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8400 WESTPARK DR.
 118
 City MCLEAN State VA Zip Code 22102-5116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA UNIVERSITY OF SCIENCE & TECHN Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 02 / 2016
Transaction ID : SA11A.362068
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MA, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8400 WESTPARK DR.
 118
 City MCLEAN State VA Zip Code 22102-5116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA UNIVERSITY OF SCIENCE & TECHN Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389315
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MABRY, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 CORALE GROVE COURT
 City CONROE State TX Zip Code 77384-5049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350729
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2988 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MABRY, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 CORALE GROVE COURT

City CONROE	State TX	Zip Code 77384-5049
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374640

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MABRY, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 CORALE GROVE COURT

City CONROE	State TX	Zip Code 77384-5049
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399665

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MABRY, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 CORALE GROVE COURT

City CONROE	State TX	Zip Code 77384-5049
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413535

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2989 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MABRY, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 CORALE GROVE COURT

City CONROE	State TX	Zip Code 77384-5049
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413536

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MABRY, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2741 SILVER CREEK DR

City BLOOMINGTON	State IN	Zip Code 47401-4582
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
489.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356270

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MABRY, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2741 SILVER CREEK DR

City BLOOMINGTON	State IN	Zip Code 47401-4582
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
489.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357688

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2990 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MABRY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2741 SILVER CREEK DR
 City BLOOMINGTON State IN Zip Code 47401-4582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362208
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MABRY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2741 SILVER CREEK DR
 City BLOOMINGTON State IN Zip Code 47401-4582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383017
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MABRY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2741 SILVER CREEK DR
 City BLOOMINGTON State IN Zip Code 47401-4582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 489.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386477
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2991 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MABRY, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2741 SILVER CREEK DR

City BLOOMINGTON	State IN	Zip Code 47401-4582
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
489.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394254

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MABRY, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2741 SILVER CREEK DR

City BLOOMINGTON	State IN	Zip Code 47401-4582
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
489.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411290

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MAC NEIL , DOUGLAS, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1715 W. WINSLOW COURT

City MEQUON	State WI	Zip Code 53092-5061
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.372995

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2992 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAC NEIL , DOUGLAS, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1715 W. WINSLOW COURT

City MEQUON	State WI	Zip Code 53092-5061
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405273

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. MACADAM, MILLARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2114 VISTA LAREDO

City NEWPORT BEACH	State CA	Zip Code 92660-4041
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS COACH AND CONSULTA
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382279

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MACADAM, MILLARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2114 VISTA LAREDO

City NEWPORT BEACH	State CA	Zip Code 92660-4041
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS COACH AND CONSULTAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403274

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2993 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACADAM, MILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 VISTA LAREDO
 City NEWPORT BEACH State CA Zip Code 92660-4041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS COACH AND CONSULTAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403276
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MACADAM, MILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 VISTA LAREDO
 City NEWPORT BEACH State CA Zip Code 92660-4041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS COACH AND CONSULTAI
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404460
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MACADAM, MILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 VISTA LAREDO
 City NEWPORT BEACH State CA Zip Code 92660-4041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS COACH AND CONSULTAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416124
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2994 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACARTHUR, TORAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2949 N 675 E
 City LEHI State UT Zip Code 84043-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER FAMILY MEDICAL Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2016
Transaction ID : SA11A.346546
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MACARTHUR, TORAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2949 N 675 E
 City LEHI State UT Zip Code 84043-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER FAMILY MEDICAL Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365131
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MACARTHUR, TORAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2949 N 675 E
 City LEHI State UT Zip Code 84043-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER FAMILY MEDICAL Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2016
Transaction ID : SA11A.393701
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2995 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACCARTHY, DON, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26021 CHANEY LANE
 City WARSAW State MO Zip Code 65355-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURR KING MFG CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366077
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MACCARTHY, DON, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26021 CHANEY LANE
 City WARSAW State MO Zip Code 65355-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURR KING MFG CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.396331
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MACCARTHY, DON, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26021 CHANEY LANE
 City WARSAW State MO Zip Code 65355-4054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURR KING MFG CO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.406887
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2996 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACDOWELL, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13410 TANGLERIDGE LANE
 City DALLAS State TX Zip Code 75240-5342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T.D INDUSTRIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387589
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. MACDONALD, JOHN, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E1271 PINE GROVE RD.
 City LUXEMBURG State WI Zip Code 54217-7755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.356437
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. MACDONALD, JOHN, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E1271 PINE GROVE RD.
 City LUXEMBURG State WI Zip Code 54217-7755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390474
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2997 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACDONALD, JOHN, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E1271 PINE GROVE RD.
 City LUXEMBURG State WI Zip Code 54217-7755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394477
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MACDONALD, JOHN, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address E1271 PINE GROVE RD.
 City LUXEMBURG State WI Zip Code 54217-7755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419866
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MACDONALD, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 GRANDVIEW
 City IRVINE State CA Zip Code 92603-0222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378375
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2998 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MACE, M, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 5968 OLD GREENWAY DR		Transaction ID : SA11A.381961
City GLEN ALLEN	State VA	Zip Code 23059-7062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MACELHINEY, ROBERT, , ,		Date of Receipt MM / DD / YYYY 09 / 01 / 2016
Mailing Address 144 TANAGER CIRCLE		Transaction ID : SA11A.387820
City GREER	State SC	Zip Code 29650-3108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) ACADEMY OF HAIRTECHNOLOGY	Occupation (for Individual) EDUCATOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MACELHINEY, ROBERT, , ,		Date of Receipt MM / DD / YYYY 09 / 01 / 2016
Mailing Address 144 TANAGER CIRCLE		Transaction ID : SA11A.387821
City GREER	State SC	Zip Code 29650-3108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) ACADEMY OF HAIRTECHNOLOGY	Occupation (for Individual) EDUCATOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2999 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACFAWN, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12912 GRAMLICH ROAD SW
 City CUMBERLAND State MD Zip Code 21502-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLEGANY COAL AND LAND CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.37797
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MACFARLAND, LANNING, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 INDIGO LN UNIT 108
 City GLENVIEW State IL Zip Code 60026-7799
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357923
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MACFARLAND, LANNING, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 INDIGO LN UNIT 108
 City GLENVIEW State IL Zip Code 60026-7799
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378475
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3000 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACFARLAND, LANNING, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 INDIGO LN
UNIT 108

City GLENVIEW State IL Zip Code 60026-7799

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.406542

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. MACGILLIVRAY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PRO BOX 1248

City LOCKEFORD State CA Zip Code 95237-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRUCKER FOR TRUMP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2016

Transaction ID : SA11A.347558

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MACGILLIVRAY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PRO BOX 1248

City LOCKEFORD State CA Zip Code 95237-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRUCKER FOR TRUMP

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348387

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3001 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACGILLIVRAY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PRO BOX 1248

City LOCKEFORD	State CA	Zip Code 95237-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCKER FOR TRUMP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.350908

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MACGILLIVRAY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PRO BOX 1248

City LOCKEFORD	State CA	Zip Code 95237-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCKER FOR TRUMP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.352644

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MACGILLIVRAY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PRO BOX 1248

City LOCKEFORD	State CA	Zip Code 95237-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCKER FOR TRUMP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : SA11A.357134

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3002 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MACGILLIVRAY, DONALD, , ,

Mailing Address PRO BOX 1248

City LOCKEFORD	State CA	Zip Code 95237-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCKER FOR TRUMP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359594

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MACGILLIVRAY, DONALD, , ,

Mailing Address PRO BOX 1248

City LOCKEFORD	State CA	Zip Code 95237-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCKER FOR TRUMP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362426

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MACGILLIVRAY, DONALD, , ,

Mailing Address PRO BOX 1248

City LOCKEFORD	State CA	Zip Code 95237-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCKER FOR TRUMP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392044

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3003 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACHNIK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21851 NEWLAND 189
 City HUNTINGTON BEACH State CA Zip Code 92646-7607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.361173
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MACHNIK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21851 NEWLAND 189
 City HUNTINGTON BEACH State CA Zip Code 92646-7607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407676
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MACINNIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2996 WENDWOOD DR
 City MARIETTA State GA Zip Code 30062-1417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386032
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3004 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACK, JOHN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36505 SE 13TH ST
 City WASHOUGAL State WA Zip Code 98671-8759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIGNATURE PHARMACY SOLUTIONS Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381558
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MACK, MERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 TERRACE ROAD
 City WESTON State MA Zip Code 02493-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381550
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MACKAY, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 MALCOLM RD, NW
 City VIENNA State VA Zip Code 22180-4123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350553
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3005 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACKE, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 691 NAPA VALLEY LANE
 4
 City CRESTVIEW HILLS State KY Zip Code 41017-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350516
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MACKE, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 691 NAPA VALLEY LANE
 4
 City CRESTVIEW HILLS State KY Zip Code 41017-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376110
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MACKE, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 691 NAPA VALLEY LANE
 4
 City CRESTVIEW HILLS State KY Zip Code 41017-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400852
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3006 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACKIE, ALEXANDER, , ,

Mailing Address **P.O. BOX 607**

City **WINTHROP** State **WA** Zip Code **98862-0607**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
08 / 02 / 2016

Transaction ID : SA11A.358895

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACKIN, LAURA, , ,

Mailing Address **4 ILANA LANE**

City **THORNWOOD** State **NY** Zip Code **10594-2001**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 13 / 2016

Transaction ID : SA11A.394906

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MACLAUGHLIN, JAMES, , ,

Mailing Address **4010 WASHINGTON ST
SUITE 100**

City **KANSAS CITY** State **MO** Zip Code **64111-2614**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LLOYD & MACLAUGHLIN LLC** Occupation (for Individual) **CONSULTANT**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416900

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **3000.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3007 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACLEAN, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1372 WOODBROOK LANE
 City SOUTHLAKE State TX Zip Code 76092-4840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363828
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MACLEAN, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1372 WOODBROOK LANE
 City SOUTHLAKE State TX Zip Code 76092-4840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365072
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MACOMBER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25980 VINEDO LANE
 City LOS ALTOS HILLS State CA Zip Code 94022-4471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411636
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3008 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACRAE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 GRANDVIEW DRIVE
 City VERONA State PA Zip Code 15147-4000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358622
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MADDEN, RICHARD, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1305
 City ROSS State CA Zip Code 94957-1305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POTLATCH CORP. Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366331
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MADDOCKS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 KENSINGTON CT
 City SCHERERVILLE State IN Zip Code 46375-1768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387802
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3009 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MADDOCKS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 KENSINGTON CT
 City SCHERERVILLE State IN Zip Code 46375-1768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411502
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MADERA, LELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 GEORGE STRAIT
 City CANYON LAKE State TX Zip Code 78133-2153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356296
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. MADERA, LELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 GEORGE STRAIT
 City CANYON LAKE State TX Zip Code 78133-2153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383086
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3010 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MADERA, LELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 GEORGE STRAIT
 City CANYON LAKE State TX Zip Code 78133-2153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411288
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. MADHAVAN, SRINIVASA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1019 SUGAR LAKES DR
 City SUGAR LAND State TX Zip Code 77478-3446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349559
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MADHAVAN, SRINIVASA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1019 SUGAR LAKES DR
 City SUGAR LAND State TX Zip Code 77478-3446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368771
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3011 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MADHAVAN, SRINIVASA, , ,

Mailing Address 1019 SUGAR LAKES DR

City SUGAR LAND State TX Zip Code 77478-3446

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 / /
Transaction ID : SA11A.379057

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MADHAVAN, SRINIVASA, , ,

Mailing Address 1019 SUGAR LAKES DR

City SUGAR LAND State TX Zip Code 77478-3446

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 / /
Transaction ID : SA11A.396951

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MADSEN, DAVID, , ,

Mailing Address 5012 NE 41ST ST.

City SEATTLE State WA Zip Code 98105-4902

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 / /
Transaction ID : SA11A.408415

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3012 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MADSEN, WAYNE, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6820 N LEOTI AVE

City CHICAGO	State IL	Zip Code 60646-1305
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LANDLORD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2016

Transaction ID : SA11A.360281

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MAFFEI, GREGORY, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4175 S HUMBOLDT ST

City CHERRY HILLS VILLA	State CO	Zip Code 80113-4818
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIBERTY MEDIA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11A.354431

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. MAFFEI, ROSEANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 W BAYBROOK LANE

City OAK BROOK	State IL	Zip Code 60523-1607
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2016

Transaction ID : SA11A.365316

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3013 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAGEE, JAMES, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **888 BOULEVARD OF THE ARTS**
801

City **SARASOTA** State **FL** Zip Code **34236-4871**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **07 / 19 / 2016**

Transaction ID : SA11A.350891

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

B. MAGEE, JAMES, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **888 BOULEVARD OF THE ARTS**
801

City **SARASOTA** State **FL** Zip Code **34236-4871**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **07 / 31 / 2016**

Transaction ID : SA11A.359693

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

C. MAGILL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **455 E. EISENHOWER PKWY**
SUITE 355

City **ANN ARBOR** State **MI** Zip Code **48108-3324**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MAGILL & RUMSEY, P.C.** Occupation (for Individual) **MAGILL & RUMSEY, P.C.**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **07 / 18 / 2016**

Transaction ID : SA11A.348839

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **400.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3014 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAGILL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 455 E. EISENHOWER PKWY
SUITE 355

City ANN ARBOR State MI Zip Code 48108-3324

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
MAGILL & RUMSEY, P.C. MAGILL & RUMSEY, P.C.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398378

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. MAGILL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 455 E. EISENHOWER PKWY
SUITE 355

City ANN ARBOR State MI Zip Code 48108-3324

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
MAGILL & RUMSEY, P.C. MAGILL & RUMSEY, P.C.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398380

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. MAGLEBY, KARL, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2666 RIVIERA MANOR

City WESTON State FL Zip Code 33332-3422

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
UNIVERSITY OF MIAMI PROFESSOR

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358569

Amount of Each Receipt this Period 2000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3015 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAGNESS, CARL, DALE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 E EUFAULA STREET
 City NORMAN State OK Zip Code 73071-5806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.395076
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MAGRUDER, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11404 FAIRFAX DRIVE
 City GREAT FALLS State VA Zip Code 22066-1308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOETIC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373224
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MAGUIRE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 S LAKE LANSING ROAD SUITE B
 City EAST LANSING State MI Zip Code 48823-7413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364327
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3016 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHAL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10048 MAGNOLIA BEND
 City BONITA SPRINGS State FL Zip Code 34135-8119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376522
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MAHASE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10510 95 AVE
 City OZONE PARK State NY Zip Code 11416-1809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK STATE Occupation (for Individual) TAX AUDITOR
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 331.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355305
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MAHASE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10510 95 AVE
 City OZONE PARK State NY Zip Code 11416-1809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK STATE Occupation (for Individual) TAX AUDITOR
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 331.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355319
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3017 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHLE, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 SCHENCK AVENUE
 City OAKWOOD State OH Zip Code 45409-2252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTGOMERY MEDICAL SOCIETY Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.371172
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MAHLE, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 SCHENCK AVENUE
 City OAKWOOD State OH Zip Code 45409-2252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTGOMERY MEDICAL SOCIETY Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.401704
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MAHONEY, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7212 UPPER RIDGE ROAD
 City EVERETT State WA Zip Code 98203-4907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESTERLINE Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350642
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3018 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAHONEY, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7212 UPPER RIDGE ROAD
 City EVERETT State WA Zip Code 98203-4907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESTERLINE Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394080
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MAHONEY, KIERAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4706 RUE BORDEAUX
 City LUTZ State FL Zip Code 33558-5366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERCURY/CLARK & WEINSTOCK Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398459
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. MAHONEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE MONARCH PLACE SUITE 1840
 City SPRINGFIELD State MA Zip Code 01144-4006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAHONEY AND ASSOCIATES Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 08 / 2016
Transaction ID : SA11A.346049
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3019 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAINES, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7511 LEWIS TYLER LANE
 City CHARLES CITY State VA Zip Code 23030-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL ONE Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347499
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MAINES, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7511 LEWIS TYLER LANE
 City CHARLES CITY State VA Zip Code 23030-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL ONE Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366757
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MAINES, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7511 LEWIS TYLER LANE
 City CHARLES CITY State VA Zip Code 23030-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL ONE Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396811
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3020 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAIRS, DANIEL, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30230 HART OAKS DRIVE

City KEENE	State CA	Zip Code 93531-1512
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COX PETROLEON TRANSPORT	Occupation (for Individual) PRES
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381276

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MAIRS, DANIEL, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30230 HART OAKS DRIVE

City KEENE	State CA	Zip Code 93531-1512
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COX PETROLEON TRANSPORT	Occupation (for Individual) PRES
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.395843

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. MAJOR, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2232 WESTWOOD PLACE

City FALLS CHURCH	State VA	Zip Code 22043-1619
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE D.MAJOR GROUP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.346479

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3021 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAJZOUB, HISH, S., DR, M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5527 RIVERCREST VALLEY DRIVE

City JOPLIN	State MO	Zip Code 64804-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.361286

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MAJZOUB, HISH, S., DR, M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5527 RIVERCREST VALLEY DRIVE

City JOPLIN	State MO	Zip Code 64804-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.377007

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. MAKINSON, D., W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 ARAPAHO EAST

City SHERMAN	State TX	Zip Code 75092-7605
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.395854

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3022 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAKINSON, D., W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 ARAPAHO EAST
 City SHERMAN State TX Zip Code 75092-7605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.395857
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. MAKOUI, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSTITUTE OF NEUROLOGICAL SURGERY, PMC Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355566
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MAKOUI, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSTITUTE OF NEUROLOGICAL SURGERY, PMC Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380782
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3023 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAKOU, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSTITUTE OF NEUROLOGICAL SURGERY, PMC Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407939
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MAKOU, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSTITUTE OF NEUROLOGICAL SURGERY, PMC Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410582
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MAKOU, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSTITUTE OF NEUROLOGICAL SURGERY, PMC Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410606
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3024 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAKOUJ, SHAHRAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4008
 City LANCASTER State CA Zip Code 93539-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSTITUTE OF NEUROLOGICAL SURGERY, PMC Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410609
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MAKOWSKI, JACEK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WALKER ROAD
 City MANCHESTER State MA Zip Code 01944-1032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358614
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 597.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362270
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3025 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 597.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378720
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 597.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390357
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MALCOLM, JOYCE, L., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 JEFFERSON STREET
 City ALEXANDRIA State VA Zip Code 22314-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCALIA LAW SCHOOL Occupation (for Individual) LAW PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 597.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413446
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3026 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MALIK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4530 FORD AVE NW

City CEDAR RAPIDS	State IA	Zip Code 52405-4317
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.374626

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MALIK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4530 FORD AVE NW

City CEDAR RAPIDS	State IA	Zip Code 52405-4317
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.414293

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MALLOY, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 GONDOLA COURT

City GREENVILLE	State SC	Zip Code 29609-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11A.358508

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3027 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALONE, JOHN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12300 LIBERTY BLVD

City ENGLEWOOD	State CO	Zip Code 80112-7009
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIBERTY MEDIA	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11A.361552

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. MANDEVILLE, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9886 SUNFLOWER HILL ST

City LAS VEGAS	State NV	Zip Code 89178-3827
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359303

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MANDEVILLE, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9886 SUNFLOWER HILL ST

City LAS VEGAS	State NV	Zip Code 89178-3827
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359304

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3028 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384096
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384103
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384104
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3029 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400730
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400731
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415363
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3030 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANDEVILLE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9886 SUNFLOWER HILL ST
 City LAS VEGAS State NV Zip Code 89178-3827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415364
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MANDEL, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8022 OKEAN TERRACE
 City LOS ANGELES State CA Zip Code 90046-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350709
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MANDEL, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8022 OKEAN TERRACE
 City LOS ANGELES State CA Zip Code 90046-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372905
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3031 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANDEL, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8022 OKEAN TERRACE
 City LOS ANGELES State CA Zip Code 90046-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.38691
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MANDEL, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8022 OKEAN TERRACE
 City LOS ANGELES State CA Zip Code 90046-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403820
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MANDEL, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8022 OKEAN TERRACE
 City LOS ANGELES State CA Zip Code 90046-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412915
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3032 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANDLER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **8 UNDERCLIFF TERRACE**

City WEST ORANGE	State NJ	Zip Code 07052-3930
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MANDEL KATZ & BROSANAN LLP	Occupation (for Individual) ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.419736

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MANEE, MONTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6 FENIMORE ROAD**

City SCARSDALE	State NY	Zip Code 10583-1606
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.409565

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MANELLO, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **711 EAST 11TH STREET
10A**

City NEW YORK	State NY	Zip Code 10009-4232
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 16 / 2016

Transaction ID : SA11A.370658

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3033 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANGELSDORF, CLARK, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 WATKINS AVENUE
 City LATROBE State PA Zip Code 15650-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346280
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MANGELSDORF, CLARK, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 WATKINS AVENUE
 City LATROBE State PA Zip Code 15650-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356561
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MANGELSDORF, CLARK, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 WATKINS AVENUE
 City LATROBE State PA Zip Code 15650-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364471
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3034 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANGELSDORF, CLARK, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 WATKINS AVENUE
 City LATROBE State PA Zip Code 15650-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389541
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MANIRE, ROSS, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 665 PLUMTREE ROAD
 City GLEN ELLYN State IL Zip Code 60137-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXTENET SYSTEMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391403
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MANJONEY, DELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 BEAVER DAM RD
 City STRATFORD State CT Zip Code 06614-1150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390893
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3035 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANJONEY, DELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 BEAVER DAM RD
 City STRATFORD State CT Zip Code 06614-1150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390895
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MANJONEY, DELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 BEAVER DAM RD
 City STRATFORD State CT Zip Code 06614-1150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390896
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MANLEY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9336 SIENNA RIDGE DR.
 City LAS VEGAS State NV Zip Code 89117-7015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEVADA FAMILY CARE Occupation (for Individual) PHYSICIAN ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373232
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3036 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANLEY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9336 SIENNA RIDGE DR.
 City LAS VEGAS State NV Zip Code 89117-7015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEVADA FAMILY CARE Occupation (for Individual) PHYSICIAN ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400250
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MANLEY, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20251 RAVENWOOD LN.
 City HUNTINGTON BEACH State CA Zip Code 92646-5457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANLEY'S BOILER INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354545
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MANLEY, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20251 RAVENWOOD LN.
 City HUNTINGTON BEACH State CA Zip Code 92646-5457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANLEY'S BOILER INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.379979
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3037 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MANLEY, STEPHEN, , ,

Mailing Address **20251 RAVENWOOD LN.**

City **HUNTINGTON BEACH** State **CA** Zip Code **92646-5457**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MANLEY'S BOILER INC** Occupation (for Individual) **SMALL BUSINESS OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
09 / 25 / 2016
Transaction ID : SA11A.408652

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MANLY, JOHN, , ,

Mailing Address **2040 SWAN DRIVE**

City **COSTA MESA** State **CA** Zip Code **92626-4757**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **SALES - LIGHTING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.370360

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MANLY, JOHN, , ,

Mailing Address **2040 SWAN DRIVE**

City **COSTA MESA** State **CA** Zip Code **92626-4757**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **SALES - LIGHTING**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
08 / 25 / 2016
Transaction ID : SA11A.380861

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3038 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANLY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2040 SWAN DRIVE

City COSTA MESA	State CA	Zip Code 92626-4757
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES - LIGHTING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380864

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MANN, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 E. CANAL DRIVE

City TURLOCK	State CA	Zip Code 95380-4159
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MANN ELECTRIC, INC.	Occupation (for Individual) ELECTRICAL CONTRACTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347615

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MANN, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 E. CANAL DRIVE

City TURLOCK	State CA	Zip Code 95380-4159
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MANN ELECTRIC, INC.	Occupation (for Individual) ELECTRICAL CONTRACTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : SA11A.366762

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3039 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANN, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 E. CANAL DRIVE
City TURLOCK State CA Zip Code 95380-4159
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MANN ELECTRIC, INC. Occupation (for Individual) ELECTRICAL CONTRACTOR
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.396835
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANNING, ELLIS, W., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 DEER VALLEY ROAD APT. 1E
City SAN RAFAEL State CA Zip Code 94903-5514
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) LAWYER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1550.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.354036
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MANNING, ELLIS, W., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 DEER VALLEY ROAD APT. 1E
City SAN RAFAEL State CA Zip Code 94903-5514
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) LAWYER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1550.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.363186
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3040 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANNING, ELLIS, W., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 DEER VALLEY ROAD
APT. 1E

City SAN RAFAEL State CA Zip Code 94903-5514

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365983

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

B. MANNING, ELLIS, W., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 DEER VALLEY ROAD
APT. 1E

City SAN RAFAEL State CA Zip Code 94903-5514

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374311

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. MANNING, JOHN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 BOSTON PL

City BOSTON State MA Zip Code 02108-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOSTON CAPITAL Occupation (for Individual) CEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398470

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3041 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.349805
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.362565
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366902
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3042 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369060
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373003
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378987
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3043 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380886
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380887
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382563
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3044 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394371
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398245
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403709
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3045 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408524
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MANSFIELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2553 S CLAYTON ST
 City DENVER State CO Zip Code 80210-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415826
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MANSOUR, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 N 7TH
 City TEMPLE State TX Zip Code 76501-3121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAYLOR SCOTT AND WHITE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412239
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3046 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MANSUR, JOSEPH, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6224 LYNN WAY
 City WOODBURY State MN Zip Code 55129-8401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361340
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MANWARING, MADELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7734 RETREAT LANE
 City WARRENTON State VA Zip Code 20186-7546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARAIS, LAURENTIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4365
 City JACKSON State WY Zip Code 83001-4365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WECKER ASSOCIATES Occupation (for Individual) STATISTICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.366964
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3047 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MARESH, FRANK, , ,			Date of Receipt MM / DD / YYYY 07 / 20 / 2016
Mailing Address 1887 HWY 39			Transaction ID : SA11A.349942
City HUNT	State TX	Zip Code 78024-3406	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARESH, FRANK, , ,			Date of Receipt MM / DD / YYYY 07 / 27 / 2016
Mailing Address 1887 HWY 39			Transaction ID : SA11A.356361
City HUNT	State TX	Zip Code 78024-3406	Amount of Each Receipt this Period 27.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARESH, FRANK, , ,			Date of Receipt MM / DD / YYYY 07 / 28 / 2016
Mailing Address 1887 HWY 39			Transaction ID : SA11A.357089
City HUNT	State TX	Zip Code 78024-3406	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 386.00		

SUBTOTAL of Receipts This Page (optional).....▶	77.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3048 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARESH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1887 HWY 39
 City HUNT State TX Zip Code 78024-3406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370466
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MARESH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1887 HWY 39
 City HUNT State TX Zip Code 78024-3406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383063
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

C. MARESH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1887 HWY 39
 City HUNT State TX Zip Code 78024-3406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411287
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 79.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3049 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARGULIES, SARAH, ANN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 N RIVER LANE
UNIT 303

City GENEVA State IL Zip Code 60134-1473

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTINENTAL ENVELOPE Occupation (for Individual) ESTIMATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 12 / 2016
Transaction ID : SA11A.392592

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MARHEFKE, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21655 SIERRA DRIVE

City BROOKFIELD State WI Zip Code 53045-4447

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
07 / 06 / 2016
Transaction ID : SA11A.345990

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MARHEFKE, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21655 SIERRA DRIVE

City BROOKFIELD State WI Zip Code 53045-4447

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
505.00

Date of Receipt
07 / 21 / 2016
Transaction ID : SA11A.352215

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 355.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3050 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARHEFKE, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21655 SIERRA DRIVE
 City BROOKFIELD State WI Zip Code 53045-4447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352217
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARHEFKE, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21655 SIERRA DRIVE
 City BROOKFIELD State WI Zip Code 53045-4447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352228
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARHEFKE, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21655 SIERRA DRIVE
 City BROOKFIELD State WI Zip Code 53045-4447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378787
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3051 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARHEFKE, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21655 SIERRA DRIVE
 City BROOKFIELD State WI Zip Code 53045-4447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410299
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARIE, BEATRICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 DUNDEE DRIVE
 City CHEVY CHASE State MD Zip Code 20815-4739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392421
 Amount of Each Receipt this Period 495.00
 Memo Item CONTRIBUTION

C. MARIER, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 WOODMERE CT. APT. 2
 City APPLETON State WI Zip Code 54911-4061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.D. PRODUCTS, INC. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368614
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	620.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3052 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARIER, LYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 WOODMERE CT.
APT. 2

City APPLETON State WI Zip Code 54911-4061

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C.D. PRODUCTS, INC. Occupation (for Individual) SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403520

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MARIER, LYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 WOODMERE CT.
APT. 2

City APPLETON State WI Zip Code 54911-4061

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C.D. PRODUCTS, INC. Occupation (for Individual) SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.415212

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MARINO, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 WILDCAT RD

City MONTICELLO State NY Zip Code 12701-4126

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
298.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2016

Transaction ID : SA11A.346550

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3053 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARINO, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 WILDCAT RD
 City MONTICELLO State NY Zip Code 12701-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352068
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MARINO, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 WILDCAT RD
 City MONTICELLO State NY Zip Code 12701-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365126
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MARINO, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 WILDCAT RD
 City MONTICELLO State NY Zip Code 12701-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387630
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3054 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARINO, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 WILDCAT RD
 City MONTICELLO State NY Zip Code 12701-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393724
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MARINO, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 WILDCAT RD
 City MONTICELLO State NY Zip Code 12701-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411056
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MARINO, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 321
 City NEW VERNON State NJ Zip Code 07976-0321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394739
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3055 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARIX, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4627 W ALABAMA
 City HOUSTON State TX Zip Code 77027-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386530
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MARKE, FATON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 BENNETT AVENUE
 City STATEN ISLAND State NY Zip Code 10312-4057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377137
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MARKER, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 STEWART DRIVE
 City LEWISTON State ID Zip Code 83501-4255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375148
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3056 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKEY, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5290 ASHLEY TRACE
 City ATLANTA State GA Zip Code 30360-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377640
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MARKEY, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 BROOKSIDE DRIVE
 City CHEVY CHASE State MD Zip Code 20815-6649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389496
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. MARKEY, PHOEBE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EDGEWOOD ROAD
 City LEXINGTON State MA Zip Code 02420-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394761
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3057 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKHAM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15180 W. 50TH DR.
 City GOLDEN State CO Zip Code 80403-1542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOUNCE INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378939
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MARKHAM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15180 W. 50TH DR.
 City GOLDEN State CO Zip Code 80403-1542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOUNCE INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390518
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MARKHAM, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 SAXONY BLVD.
 City ST PETERSBURG State FL Zip Code 33716-1284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396909
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3058 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKHAM, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 SAXONY BLVD.
 City ST PETERSBURG State FL Zip Code 33716-1284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396912
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARKHAM, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 SAXONY BLVD.
 City ST PETERSBURG State FL Zip Code 33716-1284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420275
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARKKULA, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 KINGS MOUNTAIN ROAD
 City WOODSIDE State CA Zip Code 94062-3613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378259
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3059 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKO, BARBARA, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1132 WOBURN GREEN
 City BLOOMFIELD HILLS State MI Zip Code 48302-2300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381535
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MARKS, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10799 E CRESTRIDGE CIR
 City ENGLEWOOD State CO Zip Code 80111-3855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE KENTWOOD CO Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362981
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MARON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7613 OVERLAKE DR W
 City MEDINA State WA Zip Code 98039-4734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391188
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3060 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARRA, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 CLARK AVE
 City RALEIGH State NC Zip Code 27607-7029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411198
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MARRON, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 HIGH POINT ROAD
 City WESTPORT State CT Zip Code 06880-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE ASSOCIATES,LTD. Occupation (for Individual) PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 05 / 2016
Transaction ID : SA11A.389090
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. MARSALIS, DENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 ARNOLD BOULEVARD
 City ABILENE State TX Zip Code 79605-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MGT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376415
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3061 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSH, LORAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 611 ROTUNDA STREET
City LYNCHBURG State VA Zip Code 24502-2073
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) GM OF RED TIE MUSIC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375638
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARSH, LORAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 611 ROTUNDA STREET
City LYNCHBURG State VA Zip Code 24502-2073
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) GM OF RED TIE MUSIC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375639
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARSH, LORAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 611 ROTUNDA STREET
City LYNCHBURG State VA Zip Code 24502-2073
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) GM OF RED TIE MUSIC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391748
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3062 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSH, LORAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 ROTUNDA STREET
 City LYNCHBURG State VA Zip Code 24502-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) GM OF RED TIE MUSIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403479
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MARSH, LORAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 ROTUNDA STREET
 City LYNCHBURG State VA Zip Code 24502-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) GM OF RED TIE MUSIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403481
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MARSH, LORAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 ROTUNDA STREET
 City LYNCHBURG State VA Zip Code 24502-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) GM OF RED TIE MUSIC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419068
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3063 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MARSH, LORAL, , ,			Date of Receipt
Mailing Address 611 ROTUNDA STREET			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City LYNCHBURG	State VA	Zip Code 24502-2073	Transaction ID : SA11A.419069
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) LIBERTY UNIVERSITY		Occupation (for Individual) GM OF RED TIE MUSIC	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARSHALL, MARIE, M., MS.,			Date of Receipt
Mailing Address 100 RIDGESIDE ROAD			<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2016"/>
City CHATTANOOGA	State TN	Zip Code 37411-1829	Transaction ID : SA11A.365348
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARSHALL, MARIE, M., MS.,			Date of Receipt
Mailing Address 100 RIDGESIDE ROAD			<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2016"/>
City CHATTANOOGA	State TN	Zip Code 37411-1829	Transaction ID : SA11A.397138
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3064 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSLENDER, WARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 RANLO DRIVE
 City RALEIGH State NC Zip Code 27612-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356674
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MARSLENDER, WARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 RANLO DRIVE
 City RALEIGH State NC Zip Code 27612-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357929
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MARSLENDER, WARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 RANLO DRIVE
 City RALEIGH State NC Zip Code 27612-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.373688
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3065 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSLENDER, WARD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3608 RANLO DRIVE

City RALEIGH	State NC	Zip Code 27612-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379658

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MARSLENDER, WARD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3608 RANLO DRIVE

City RALEIGH	State NC	Zip Code 27612-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.396109

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MARSOLAN, NORMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1164 BONVIEW LN NE

City ATLANTA	State GA	Zip Code 30324-2904
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEORGIA TECH	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
438.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2016

Transaction ID : SA11A.345854

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	132.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3066 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.356433
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370816
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.380233
 Amount of Each Receipt this Period 105.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3067 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382388
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384080
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396787
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3068 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409689
 Amount of Each Receipt this Period 38.00
 Memo Item CONTRIBUTION

B. MARSOLAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1164 BONVIEW LN NE
 City ATLANTA State GA Zip Code 30324-2904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GEORGIA TECH Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409690
 Amount of Each Receipt this Period 38.00
 Memo Item CONTRIBUTION

C. MARTENS, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 PARK SKYLINE RD. 14TH FLOOR
 City SANTA ANA State CA Zip Code 92705-3187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.354035
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 326.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3069 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MARTENS, DON, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2016 Transaction ID : SA11A.416828
Mailing Address 1921 PARK SKYLINE RD. 14TH FLOOR		Amount of Each Receipt this Period 100.00
City SANTA ANA	State CA	Zip Code 92705-3187
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARTENSON, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016 Transaction ID : SA11A.381333
Mailing Address 10915 ALLEN ROAD		Amount of Each Receipt this Period 250.00
City ALLEN PARK	State MI	Zip Code 48101-1141
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARTENS, WILLIAM, R., ,		Date of Receipt MM / DD / YYYY 08 / 03 / 2016 Transaction ID : SA11A.360303
Mailing Address 188 MERRILL ROAD		Amount of Each Receipt this Period 200.00
City POWNAI	State ME	Zip Code 04069-6428
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3070 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14047 BROOKCREST DRIVE
City DALLAS State TX Zip Code 75240-2707
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.347811
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MARTIN, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2241 E. CONTINENTAL BLVD.SUITE 140
City SOUTHLAKE State TX Zip Code 76092-9782
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390601
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MARTIN, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2328 COLISEUM STREET
City NEW ORLEANS State LA Zip Code 70130-5767
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390781
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3071 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2328 COLISEUM STREET

City NEW ORLEANS	State LA	Zip Code 70130-5767
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415978

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MARTIN, EDWARD, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON	State PA	Zip Code 15068-5308
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.347662

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. MARTIN, EDWARD, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON	State PA	Zip Code 15068-5308
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354090

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3072 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, EDWARD, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON	State PA	Zip Code 15068-5308
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
08 / 09 / 2016
Transaction ID : SA11A.363533

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. MARTIN, ELLEN, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4955 GLENBROOK ROAD NW

City WASHINGTON	State DC	Zip Code 20016-3222
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOUSEWIFE	Occupation (for Individual) HOUSEWIFE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 08 / 2016
Transaction ID : SA11A.361481

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. MARTINS, ERIKA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 40

City KAPAA	State HI	Zip Code 96746-0040
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KAUAI MARRIOTT HOTELS AND RESORTS	Occupation (for Individual) BANQUET CAPTAIN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
268.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.370020

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3073 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTINS, ERIKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 40
 City KAPAA State HI Zip Code 96746-0040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAUAI MARRIOTT HOTELS AND RESORTS Occupation (for Individual) BANQUET CAPTAIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400253
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MARTINS, ERIKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 40
 City KAPAA State HI Zip Code 96746-0040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAUAI MARRIOTT HOTELS AND RESORTS Occupation (for Individual) BANQUET CAPTAIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412238
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

C. MARTINS, ERIKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 40
 City KAPAA State HI Zip Code 96746-0040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAUAI MARRIOTT HOTELS AND RESORTS Occupation (for Individual) BANQUET CAPTAIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412251
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	143.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3074 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTINS, ERIKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 40
 City KAPAA State HI Zip Code 96746-0040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAUAI MARRIOTT HOTELS AND RESORTS Occupation (for Individual) BANQUET CAPTAIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412253
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MARTIN, G. H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3216 BRITTANY POINT
 City LANSDALE State PA Zip Code 19446-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349448
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. MARTIN, G. H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3216 BRITTANY POINT
 City LANSDALE State PA Zip Code 19446-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359442
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3075 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, G. H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3216 BRITTANY POINT
 City LANSDALE State PA Zip Code 19446-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382975
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARTIN, GH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3216 BRITTANY POINTE
 City LANSDALE State PA Zip Code 19446-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363865
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MARTIN, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 ALLEN PARKWAY SUITE 2100
 City HOUSTON State TX Zip Code 77019-7111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER HUGHES INCORPORATED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415656
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3076 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, JAYME, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5258 SW HUMPHREY BLVD
 City PORTLAND State OR Zip Code 97221-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367891
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MARTIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 SW 300TH PL
 City FEDERAL WAY State WA Zip Code 98023-2325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360268
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. MARTINO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 E 59TH ST FL30
 City NEW YORK State NY Zip Code 10022-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASON CAPITAL Occupation (for Individual) HEDGE FUND MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400483
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 17500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3077 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12200 ROSEMOUNT CT.
City FORT MYERS State FL Zip Code 33913-8355
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348412
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MARTINELLI, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2781 HARBINS RD SE
City BETHLEHEM State GA Zip Code 30620-4519
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) N&N MOVING SUPPLIES Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353750
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARTINELLI, PETE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2781 HARBINS RD SE
City BETHLEHEM State GA Zip Code 30620-4519
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) N&N MOVING SUPPLIES Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379870
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3078 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12200 ROSEMOUNT CT.
 City FORT MYERS State FL Zip Code 33913-8355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398093
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MARTIN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12200 ROSEMOUNT CT.
 City FORT MYERS State FL Zip Code 33913-8355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405378
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MARTINELLI, PETE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2781 HARBINS RD SE
 City BETHLEHEM State GA Zip Code 30620-4519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N&N MOVING SUPPLIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410680
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3079 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTI, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 SHIPWRIGHT CIRCLE
 City PORT ROYAL State SC Zip Code 29935-1100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356681
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MARTIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N67WW31181 CLUB CIRCLE WEST
 City HARTLAND I State WI Zip Code 53029-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349790
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MARTIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N67WW31181 CLUB CIRCLE WEST
 City HARTLAND I State WI Zip Code 53029-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349791
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3080 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N67WW31181 CLUB CIRCLE WEST

City HARTLAND I	State WI	Zip Code 53029-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385980

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MARTIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N67WW31181 CLUB CIRCLE WEST

City HARTLAND I	State WI	Zip Code 53029-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401276

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MARTIN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N67WW31181 CLUB CIRCLE WEST

City HARTLAND I	State WI	Zip Code 53029-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.423095

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3081 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1742 PEACOCK LANE
 City FULLERTON State CA Zip Code 92833-2244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INFORMATION SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348435
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. MARTIN, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1742 PEACOCK LANE
 City FULLERTON State CA Zip Code 92833-2244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INFORMATION SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372574
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. MARTIN, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1742 PEACOCK LANE
 City FULLERTON State CA Zip Code 92833-2244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INFORMATION SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411044
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3082 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, RUSSELL, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8502 LINDEN CT

City GRANBURY	State TX	Zip Code 76049-4754
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.352776

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MARTIN, RUSSELL, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8502 LINDEN CT

City GRANBURY	State TX	Zip Code 76049-4754
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.352779

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MARTINEZ, SHERRILL, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 981 S CLOVER AVENUE

City SAN JOSE	State CA	Zip Code 95128-3323
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.347740

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3083 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, THOMAS, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 EAGLE WAY
 City BOULDER State CO Zip Code 80301-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381567
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. MARTIN, WILLIAM, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4794 BAMBOO WAY
 City FAIR OAKS State CA Zip Code 95628-6040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348357
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARTIN, WILLIAM, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4794 BAMBOO WAY
 City FAIR OAKS State CA Zip Code 95628-6040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414457
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3084 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350369
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350443
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357682
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3085 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 08 / 20 / 2016
Transaction ID : SA11A.376190
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384847
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384848
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3086 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386275
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393868
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. MARVIN, AUDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 LOWER ROSWELL RD
 UNIT #7300
 City MARIETTA State GA Zip Code 30068-4167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394515
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3087 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 404.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394528

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. MARVIN, AUDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4220 LOWER ROSWELL RD
UNIT #7300

City MARIETTA State GA Zip Code 30068-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 404.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400897

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. MARX, RICHARD, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 440

City WAPPINGERS FALLS State NY Zip Code 12590-0440

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 753.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363543

Amount of Each Receipt this Period 253.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 303.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3088 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARX, RICHARD, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 440

City WAPPINGERS FALLS State NY Zip Code 12590-0440

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 753.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392418

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. MASCHHOFF, JULIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18391 POST OAK RD

City CARLYLE State IL Zip Code 62231-3017

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.348149

Amount of Each Receipt this Period 10000.00

Memo Item CONTRIBUTION

C. MASCHINO, MERRILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7710 FALSTAFF COURT

City MCLEAN State VA Zip Code 22102-2721

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388440

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3089 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASCHINO, MERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7710 FALSTAFF COURT
 City MCLEAN State VA Zip Code 22102-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414883
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MASCHINO, MERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7710 FALSTAFF COURT
 City MCLEAN State VA Zip Code 22102-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414893
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. MASENHEIMER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2148 RIVERBEND ROAD
 City ALLENTOWN State PA Zip Code 18103-9728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENCOR SERVICES, INC. Occupation (for Individual) EXECUTIVE V. P.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365405
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 325.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3090 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASENHEIMER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2148 RIVERBEND ROAD
 City ALLENTOWN State PA Zip Code 18103-9728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENCOR SERVICES, INC. Occupation (for Individual) EXECUTIVE V. P.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413880
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MASETTI, PAOLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 CARILLON CT
 City CREVE COEUR State MO Zip Code 63141-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC ST LOUIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.345934
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. MASETTI, PAOLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 CARILLON CT
 City CREVE COEUR State MO Zip Code 63141-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC ST LOUIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 07 / 17 / 2016
Transaction ID : SA11A.348993
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	307.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3091 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASETTI, PAOLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 CARILLON CT
 City CREVE COEUR State MO Zip Code 63141-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC ST LOUIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : SA11A.365169
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MASETTI, PAOLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 CARILLON CT
 City CREVE COEUR State MO Zip Code 63141-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC ST LOUIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370024
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MASETTI, PAOLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 CARILLON CT
 City CREVE COEUR State MO Zip Code 63141-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC ST LOUIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.380894
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3092 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASETTI, PAOLO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 848 CARILLON CT

City CREVE COEUR	State MO	Zip Code 63141-6316
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPC ST LOUIS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380895

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MASETTI, PAOLO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 848 CARILLON CT

City CREVE COEUR	State MO	Zip Code 63141-6316
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPC ST LOUIS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2016

Transaction ID : SA11A.393660

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MASETTI, PAOLO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 848 CARILLON CT

City CREVE COEUR	State MO	Zip Code 63141-6316
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPC ST LOUIS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
409.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394245

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3093 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASETTI, PAOLO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 CARILLON CT
 City CREVE COEUR State MO Zip Code 63141-6316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPC ST LOUIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409119
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MASIELLO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 LAFAYETTE
 City HAMPTON State NH Zip Code 03842-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIANCE HOLDINGS, INC. Occupation (for Individual) CEO-CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 03 / 2016
Transaction ID : SA11A.389246
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MASIELLO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 LAFAYETTE
 City HAMPTON State NH Zip Code 03842-4105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIANCE HOLDINGS, INC. Occupation (for Individual) CEO-CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418914
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3094 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 RUSKIN DR.

City ELK GROVE VILLAGE	State IL	Zip Code 60007-3359
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALEXIAN BROTHERS	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344475

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MASON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 310 W 19TH STREET

City HUTCHINSON	State KS	Zip Code 67502-4028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.376513

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. MASSEE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6221 CENTURY HILL DR

City RIVERSIDE	State CA	Zip Code 92506-4666
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RIVERSIDE RADIOLOGY	Occupation (for Individual) RADIOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348762

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3095 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASSEE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6221 CENTURY HILL DR
 City RIVERSIDE State CA Zip Code 92506-4666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVERSIDE RADIOLOGY Occupation (for Individual) RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348771
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MASSEE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6221 CENTURY HILL DR
 City RIVERSIDE State CA Zip Code 92506-4666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVERSIDE RADIOLOGY Occupation (for Individual) RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384617
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MASSEE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6221 CENTURY HILL DR
 City RIVERSIDE State CA Zip Code 92506-4666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVERSIDE RADIOLOGY Occupation (for Individual) RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384651
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3096 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASSEE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6221 CENTURY HILL DR
 City RIVERSIDE State CA Zip Code 92506-4666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVERSIDE RADIOLOGY Occupation (for Individual) RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401311
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MASSEY, E, DAVISON, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 CHESTNUT ST
 City WINNETKA State IL Zip Code 60093-3809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389787
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. MASSEY, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27741 VIA CERRO GORDO
 City LOS ALTOS HILLS State CA Zip Code 94022-3267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403071
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3097 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASSER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 CAMILLE DR
 City OSPREY State FL Zip Code 34229-9273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354657
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MASSER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 CAMILLE DR
 City OSPREY State FL Zip Code 34229-9273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377446
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MASSER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 CAMILLE DR
 City OSPREY State FL Zip Code 34229-9273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405123
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3098 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASSEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 DEERHILL DRIVE
 City HO HO KUS State NJ Zip Code 07423-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIDNEY AUSTIN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414388
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MASSMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5508 TANBARK ROAD
 City DALLAS State TX Zip Code 75229-5559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345210
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MASSOUD, LOUISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 367
 City STRASBURG State VA Zip Code 22657-0367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378589
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3099 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASTER, CARL, L., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3944 REGAL CT
 City VIRGINIA BEACH State VA Zip Code 23452-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED USN Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360288
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MASTERSON, CONRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 TURTLE CREEK BLVD., #1103
 City DALLAS State TX Zip Code 75219-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362199
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MASTERSON, CONRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 TURTLE CREEK BLVD., #1103
 City DALLAS State TX Zip Code 75219-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365133
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3100 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASTERSON, CONRAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 TURTLE CREEK BLVD., #1103

City DALLAS	State TX	Zip Code 75219-5525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380194

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MASTERSON, CONRAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 TURTLE CREEK BLVD., #1103

City DALLAS	State TX	Zip Code 75219-5525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380196

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MASTERSON, CONRAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 TURTLE CREEK BLVD., #1103

City DALLAS	State TX	Zip Code 75219-5525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.409004

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3101 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASTERS, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4912 CHESTNUT STREET

City BELLAIRE	State TX	Zip Code 77401-3410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEMORIAL HERMANN HEALTH SYSTEM	Occupation (for Individual) SIX SIGMA MASTER BLACK BELT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387917

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MASTERS, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4912 CHESTNUT STREET

City BELLAIRE	State TX	Zip Code 77401-3410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEMORIAL HERMANN HEALTH SYSTEM	Occupation (for Individual) SIX SIGMA MASTER BLACK BELT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419739

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MASTERS, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4912 CHESTNUT STREET

City BELLAIRE	State TX	Zip Code 77401-3410
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEMORIAL HERMANN HEALTH SYSTEM	Occupation (for Individual) SIX SIGMA MASTER BLACK BELT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419743

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3102 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MASTERSON, MARGUERITE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 20319
 City LONG BEACH State CA Zip Code 90801-3319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366063
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. MATESICH, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 ONNEN COURT
 City GRANVILLE State OH Zip Code 43023-8000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATESICH DISTRIBUTING COMPANY Occupation (for Individual) BEER DISTRIBUTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.396023
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. MATHEWES, DARLYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 GARDNERS MILL ROAD
 City AUGUSTA State GA Zip Code 30907-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOMMY MATHEWES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.396969
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3103 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATHERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 FOUNDERS VIEW LANE
 City MIDLOTHIAN State VA Zip Code 23113-6387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 11 / 2016**
Transaction ID : SA11A.346505
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MATHERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 FOUNDERS VIEW LANE
 City MIDLOTHIAN State VA Zip Code 23113-6387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383678
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MATHERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 FOUNDERS VIEW LANE
 City MIDLOTHIAN State VA Zip Code 23113-6387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419222
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3104 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATHER, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14820 CLARE BRIDGE LANE
 City BROOKFIELD State WI Zip Code 53005-1537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAACKE & JOYS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.363006
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MATKOM, EDWARD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5375 N LAKE DRIVE
 City WHITEFISH BAY State WI Zip Code 53217-5386
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN MARKETS- GORMAN Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3700.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391337
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MATTHEWS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1679 S KINGSTON WAY
 City AURORA State CO Zip Code 80012-5124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348767
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3105 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATTHEWS, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1679 S KINGSTON WAY

City AURORA	State CO	Zip Code 80012-5124
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348778

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MATTHEWS, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 SUNNYSIDE AVENUE

City DUMONT	State NJ	Zip Code 07628-3612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLOBAL BRANDS GROUP	Occupation (for Individual) EXECUTIVE DRIVER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402643

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MATTHEWS, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 275

City BEULAH	State WY	Zip Code 82712-0275
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365690

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3106 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATTHEWS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 275
 City BEULAH State WY Zip Code 82712-0275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390498
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MATTHEWS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 275
 City BEULAH State WY Zip Code 82712-0275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.400354
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MATTHEWS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 275
 City BEULAH State WY Zip Code 82712-0275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.400355
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3107 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MATTOON, DANIEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6344 CAVALIER CORRIDOR
 City FALLS CHURCH State VA Zip Code 22044-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MATTOON & ASSOC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367874
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MATTOX, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 673 WOODLAND SQ LOOP SE STE 320
 City LACEY State WA Zip Code 98503-1066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSA Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367928
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. MATUSZAK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10473 SAINT ANDREWS ROAD
 City BOYNTON BEACH State FL Zip Code 33436-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NATIONAL ORTHOPEDICS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401093
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3108 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAULDIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 COUNTRY PARK CIRCLE
 City PETAL State MS Zip Code 39465-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAULDIN COMPANY Occupation (for Individual) MANAGER GENERAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359908
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. MAULDIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 COUNTRY PARK CIRCLE
 City PETAL State MS Zip Code 39465-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAULDIN COMPANY Occupation (for Individual) MANAGER GENERAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384779
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. MAULDIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 COUNTRY PARK CIRCLE
 City PETAL State MS Zip Code 39465-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAULDIN COMPANY Occupation (for Individual) MANAGER GENERAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419643
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	177.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3109 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAURAN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 PARSONAGE STREET

City PROVIDENCE	State RI	Zip Code 02903-4732
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANK MAURAN	Occupation (for Individual) PRINTING/SHIPPING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2016

Transaction ID : SA11A.349077

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MAURAN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 PARSONAGE STREET

City PROVIDENCE	State RI	Zip Code 02903-4732
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANK MAURAN	Occupation (for Individual) PRINTING/SHIPPING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2016

Transaction ID : SA11A.363322

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MAURAN, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 PARSONAGE STREET

City PROVIDENCE	State RI	Zip Code 02903-4732
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FRANK MAURAN	Occupation (for Individual) PRINTING/SHIPPING
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.369072

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3110 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MAURAN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PARSONAGE STREET
 City PROVIDENCE State RI Zip Code 02903-4732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANK MAURAN Occupation (for Individual) PRINTING/SHIPPING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398694
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MAURER, CHARLES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1630 RUSTIC HOLLOW LANE
 City KATY State TX Zip Code 77450-5126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOW CHEMICAL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406498
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MAURER, DANIELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5040 36TH ST N
 City ARLINGTON State VA Zip Code 22207-2947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIERCE GOVERNMENT RELATIONS Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346068
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3111 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MAURIZI, MICHAEL, , ,		Date of Receipt MM / DD / YYYY 07 / 29 / 2016 Transaction ID : SA11A.356862
Mailing Address 2015 WOODHOLLOW DR		Amount of Each Receipt this Period 2500.00
City COLUMBIA	State MO	Zip Code 65203-0909
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MAXA, JOHN, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016 Transaction ID : SA11A.416206
Mailing Address 2698 BONAR HALL PATH		Amount of Each Receipt this Period 250.00
City DULUTH	State GA	Zip Code 30097-4975
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NEW LONDON ANESTHESIA	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MAXEY, MARGARET, , ,		Date of Receipt MM / DD / YYYY 07 / 11 / 2016 Transaction ID : SA11A.346500
Mailing Address 5300 S.ATLANTIC AVE. #5605 #5605		Amount of Each Receipt this Period 25.00
City NEW SMYRNA BEACH	State FL	Zip Code 32169-4595
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 542.00	

SUBTOTAL of Receipts This Page (optional).....▶	2775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3112 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349258
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357668
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359645
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3113 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363781
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363782
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368407
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 65.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3114 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370141
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381953
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390890
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 55.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3115 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400710
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402541
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407711
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3116 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407865
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415964
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MAXEY, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 S.ATLANTIC AVE. #5605
 #5605
 City NEW SMYRNA BEACH State FL Zip Code 32169-4595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 542.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418321
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3117 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXIM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 HUNT RD
 City RADNOR State PA Zip Code 19008-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIM AUTOMOTIVE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358416
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. MAXIM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 HUNT RD
 City RADNOR State PA Zip Code 19008-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIM AUTOMOTIVE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358417
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. MAXIM, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 HUNT RD
 City RADNOR State PA Zip Code 19008-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIM AUTOMOTIVE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365743
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3118 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXIM, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 925 HUNT RD

City RADNOR	State PA	Zip Code 19008-1525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAXIM AUTOMOTIVE	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382490

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MAXIM, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 925 HUNT RD

City RADNOR	State PA	Zip Code 19008-1525
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAXIM AUTOMOTIVE	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.416169

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MAXSON, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 216 E 9400 S

City PARADISE	State UT	Zip Code 84328-9748
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
277.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.370648

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3119 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAXSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 E 9400 S
 City PARADISE State UT Zip Code 84328-9748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387216
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MAXSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 E 9400 S
 City PARADISE State UT Zip Code 84328-9748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409771
 Amount of Each Receipt this Period
 102.00
 Memo Item
 CONTRIBUTION

C. MAXWELL, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 COENEN LN.
 City NEW BRAUNFELS State TX Zip Code 78130-2923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380212
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 452.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3120 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MAY, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10814 EVERWOOD LANE
 City HOUSTON State TX Zip Code 77024-5416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364251
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MAYER, EDITH, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 EDENGALE WAY
 City AIKEN State SC Zip Code 29803-3770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350007
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MAYER, EDITH, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 EDENGALE WAY
 City AIKEN State SC Zip Code 29803-3770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350008
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3121 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYER, EDITH, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 EDENGALE WAY
 City AIKEN State SC Zip Code 29803-3770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388248
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MAYER, EDITH, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 EDENGALE WAY
 City AIKEN State SC Zip Code 29803-3770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397042
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MAYER, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4157 BALLARD TRAIL
 City THE COLONY State TX Zip Code 75056-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350534
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3122 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYER, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4157 BALLARD TRAIL
 City THE COLONY State TX Zip Code 75056-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383243
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MAYER, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4157 BALLARD TRAIL
 City THE COLONY State TX Zip Code 75056-3033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383250
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MAYER, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 488
 City STANFIELD State OR Zip Code 97875-0488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347322
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3123 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYER, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 488
 City STANFIELD State OR Zip Code 97875-0488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.401562
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MAYER, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 488
 City STANFIELD State OR Zip Code 97875-0488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405702
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MAYLE, CAROLYN, HICKS, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 850 I ST NW STE 800
 City WASHINGTON State DC Zip Code 20005-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOCKORNY GROUP Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358526
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3124 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344343
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.353964
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357201
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	82.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3125 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368515
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382350
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388436
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3126 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397631
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408922
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413358
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3127 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413399
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MAYNARD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TURNPIKE RD
 SUITE 100
 City SOUTHBOROUGH State MA Zip Code 01772-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420157
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MAYORAL, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 718 FAIROAKS LANE
 City MAITLAND State FL Zip Code 32751-4515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTER FOR DIGESTIVE HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374304
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3128 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYORAL, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 718 FAIROAKS LANE

City MAITLAND	State FL	Zip Code 32751-4515
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENTER FOR DIGESTIVE HEALTH	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410730

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MAYORAL, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 718 FAIROAKS LANE

City MAITLAND	State FL	Zip Code 32751-4515
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENTER FOR DIGESTIVE HEALTH	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410731

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MAYOR, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2905 PLUMB STREET

City HOUSTON	State TX	Zip Code 77005-3057
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAKER BOTTS LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417911

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3129 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYS, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9686 W.DANZIG PLACE
 City LITTLETON State CO Zip Code 80127-8573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W M MINING COMPANY LLC Occupation (for Individual) MINING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350876
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MAYS, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9686 W.DANZIG PLACE
 City LITTLETON State CO Zip Code 80127-8573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W M MINING COMPANY LLC Occupation (for Individual) MINING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374656
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MAYS, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9686 W.DANZIG PLACE
 City LITTLETON State CO Zip Code 80127-8573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W M MINING COMPANY LLC Occupation (for Individual) MINING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399698
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3130 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MC CABE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 CAMERON COURT
 City WINTERVILLE State NC Zip Code 28590-8568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROFESSOR Occupation (for Individual) ECU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348915
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MC CABE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 CAMERON COURT
 City WINTERVILLE State NC Zip Code 28590-8568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROFESSOR Occupation (for Individual) ECU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399760
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MC CABE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 CAMERON COURT
 City WINTERVILLE State NC Zip Code 28590-8568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROFESSOR Occupation (for Individual) ECU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399761
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3131 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MC CABE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 CAMERON COURT
 City WINTERVILLE State NC Zip Code 28590-8568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROFESSOR Occupation (for Individual) ECU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413537
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. MC CABE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2104 CAMERON COURT
 City WINTERVILLE State NC Zip Code 28590-8568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROFESSOR Occupation (for Individual) ECU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422404
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. MC DONALD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 CLYDESDALE STREET
 City MARYVILLE State TN Zip Code 37801-3728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIEBURG INTL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361459
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3132 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MC EACHERN, MARY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 EL CENTRO STREET
 City ST. PETE BEACH State FL Zip Code 33706-3908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.356847
 Amount of Each Receipt this Period 151.00
 Memo Item CONTRIBUTION

B. MCADAMS, DONALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 549 CHELSEA STREET
 City BELLAIRE State TX Zip Code 77401-5007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390797
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MCADARAGH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 541 PUTTER LANE
 City LONGBOAT KEY State FL Zip Code 34228-3521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419720
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	901.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3133 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCADARAGH, PATRICK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15465 LUCERNE CIRCLE
 City BURNSVILLE State MN Zip Code 55306-4410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDCONTINENT MEDIA, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370779
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCAFEE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 BRYN MAWR CIRCLE
 City HOUSTON State TX Zip Code 77024-6811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US PHYSICAL THERAPY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380937
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MCALLISTER, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 TWIN LAKES DR
 City GRAY State GA Zip Code 31032-5037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.372959
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3134 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCALLISTER, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 TWIN LAKES DR
 City GRAY State GA Zip Code 31032-5037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383784
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MCALLISTER, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 TWIN LAKES DR
 City GRAY State GA Zip Code 31032-5037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397921
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MCANDREWS, GEORGE, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 LAKE SHORE DRIVE S
 City BARRINGTON State IL Zip Code 60010-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357890
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3135 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCANDREWS, GEORGE, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1490 LAKE SHORE DRIVE S

City BARRINGTON	State IL	Zip Code 60010-3532
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2350.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.383531

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

B. MCBAIN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10155 IDLE PINE LN

City BONITA SPRINGS	State FL	Zip Code 34135-4100
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 25 / 2016
Transaction ID : SA11A.379777

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MCBRIDE, HERMAN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14600 ST. RT. 65 P.O.BOX 491
14600 STATE ROUTE 65

City JACKSON CENTER	State OH	Zip Code 45334-0491
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RISING SUN EXPRESS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 27 / 2016
Transaction ID : SA11A.410512

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3136 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBRIDE, HERMAN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14600 ST. RT. 65 P.O.BOX 491
 14600 STATE ROUTE 65
 City JACKSON CENTER State OH Zip Code 45334-0491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RISING SUN EXPRESS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410513
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCBRIDE, LOREN, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 2ND AVE N.
 City SURFSIDE BEACH State SC Zip Code 29575-3841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348431
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCBRIDE, LOREN, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 2ND AVE N.
 City SURFSIDE BEACH State SC Zip Code 29575-3841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.384936
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3137 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBRIDE, LOREN, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 420 2ND AVE N.
City SURFSIDE BEACH State SC Zip Code 29575-3841
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391923
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCBRIDE, LOREN, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 420 2ND AVE N.
City SURFSIDE BEACH State SC Zip Code 29575-3841
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400744
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCBRIDE, LOREN, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 420 2ND AVE N.
City SURFSIDE BEACH State SC Zip Code 29575-3841
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.401561
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3138 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBRIDE, LOREN, C., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 2ND AVE N.
 City SURFSIDE BEACH State SC Zip Code 29575-3841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405657
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCBRIDE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3986 MINERVA AVE
 City LOS ANGELES State CA Zip Code 90066-5020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356352
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. MCBRIDE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3986 MINERVA AVE
 City LOS ANGELES State CA Zip Code 90066-5020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383054
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3139 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCBRIDE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3986 MINERVA AVE
 City LOS ANGELES State CA Zip Code 90066-5020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411278
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. MCBRYDE, NEILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 HEMPSTEAD PLACE
 City CHARLOTTE State NC Zip Code 28207-2323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOORE AND VAN ALLEN PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.348192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCBRYDE, NEILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 HEMPSTEAD PLACE
 City CHARLOTTE State NC Zip Code 28207-2323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOORE AND VAN ALLEN PLLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410365
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3140 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCAHAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2903 YAUPON PLACE
 City AMARILLO State TX Zip Code 79124-4959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417373
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MCCAMISH, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1371 PLATTE AVE.
 City VENTURA State CA Zip Code 93004-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.387104
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MCCAMISH, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1371 PLATTE AVE.
 City VENTURA State CA Zip Code 93004-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.387105
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3141 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCANN, FERGUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1946 WASHINGTON STREET, UNIT 233
 City AUBURNDALE State MA Zip Code 02466-3048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390809
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

B. MCCANN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 416
 City GROVEPORT State OH Zip Code 43125-0416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) R E DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351954
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. MCCANN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 416
 City GROVEPORT State OH Zip Code 43125-0416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) R E DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.412671
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 13900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3142 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCARTHY, DEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7772 OYSTER BAY LANE
 City CINCINNATI State OH Zip Code 45244-2562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351993
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCCARTHY, DEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7772 OYSTER BAY LANE
 City CINCINNATI State OH Zip Code 45244-2562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368419
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCCARTHY, DEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7772 OYSTER BAY LANE
 City CINCINNATI State OH Zip Code 45244-2562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386454
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3143 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCARTHY, KATHLEEN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10449 BAINBRIDGE AVENUE
 City LOS ANGELES State CA Zip Code 90024-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.406759
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

B. MCCARTY, KENNITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16600 CENTERFIELD DR 203
 City EAGLE RIVER State AK Zip Code 99577-7702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARITAL FAMILY THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359904
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. MCCARTY, KENNITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16600 CENTERFIELD DR 203
 City EAGLE RIVER State AK Zip Code 99577-7702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARITAL FAMILY THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384817
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10518.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3144 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCARTY, KENNITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16600 CENTERFIELD DR
203

City EAGLE RIVER State AK Zip Code 99577-7702

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARITAL FAMILY THERAPIST

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 236.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419633

Amount of Each Receipt this Period 59.00

Memo Item CONTRIBUTION

B. MCCAULEY, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 633 SAWTOOTH ST.

City POWELL State WY Zip Code 82435-1758

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415750

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. MCCAWE, BRUCE, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1607

City BELLEVUE State WA Zip Code 98009-1607

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRUCE MCCAWE COMPANY Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367948

Amount of Each Receipt this Period 10000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 11059.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3145 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCAY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8602 AMBLECTOE ROAD
 City KNOXVILLE State TN Zip Code 37923-6829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.347738
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCCHESENEY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 486 GLENMARY LANE
 City SAINT DAVIDS State PA Zip Code 19087-4404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRYN MAWR COMMUNICATIONS Occupation (for Individual) PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386987
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCCLERREN, ADRIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 49307
 City JACKSONVILLE State FL Zip Code 32240-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INJURY CARE CENTERS Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.411996
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3146 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCLENDON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17108 CHAMPIONS LAKEWAY
 City TOMBALL State TX Zip Code 77375-8377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CYPRESS LAKEWOOD CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391883
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCCLUNG, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1511 PIPER DUNES PLACE
 City FERNANDINA BEACH State FL Zip Code 32034-6619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365957
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCCOLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3424 JARVIS STRET
 City SAN DIEGO State CA Zip Code 92106-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345234
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1285.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3147 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCOLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3424 JARVIS STRET
 City SAN DIEGO State CA Zip Code 92106-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391081
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MCCOLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3424 JARVIS STRET
 City SAN DIEGO State CA Zip Code 92106-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408116
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MCCOLL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3424 JARVIS STRET
 City SAN DIEGO State CA Zip Code 92106-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408117
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3148 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCCONAGHY, GEORGE, , ,

Mailing Address **962 MERRIMAC CIRCLE**

City **NAPERVILLE** State **IL** Zip Code **60540-7107**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 31 / 2016

Transaction ID : SA11A.359146

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCCONAGHY, GEORGE, , ,

Mailing Address **962 MERRIMAC CIRCLE**

City **NAPERVILLE** State **IL** Zip Code **60540-7107**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.422759

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCCORMACK, BRIAN, , MR,

Mailing Address **3900 CATHEDRAL AVE NW 610A**

City **WASHINGTON** State **DC** Zip Code **20016-5297**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **EDISON ELECTRIC INSTITUTE** Occupation (for Individual) **EXTERNAL AFFAIRS**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
09 / 16 / 2016

Transaction ID : SA11A.396220

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **2700.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3149 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCORKLE, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 306 JEFFERY LN
City NORTHFIELD State IL Zip Code 60093-3142

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCORKLE Occupation (for Individual) MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353586

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. MCCORKLE, KATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 306 JEFFERY LN
City NORTHFIELD State IL Zip Code 60093-3142

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCORKLE Occupation (for Individual) MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410964

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. MCCORMICK, MARSHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 PREMIUM PT
City NEW ROCHELLE State NY Zip Code 10801-5327

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370193

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3150 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCOURT, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 N CANNON DR
 STE 302
 City BEVERLY HILLS State CA Zip Code 90210-4724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAMIE ENTERPRISES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.346060
 Amount of Each Receipt this Period 12500.00
 Memo Item
 CONTRIBUTION

B. MCCOY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5001 DITTO LANE
 City WICHITA FALLS State TX Zip Code 76302-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EHOMETER COMPANY Occupation (for Individual) ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349195
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. MCCOY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 SOUTH STREET
 City DAVIDSON State NC Zip Code 28036-8062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FULCRA ENTERPRISES INC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366547
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	14000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3151 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MCCRAY, GREGORY, C., MR.,		Date of Receipt MM / DD / YYYY 07 / 23 / 2016
Mailing Address 9778 MAPLE TRACE CIRCLE		Transaction ID : SA11A.354609
City FAIRFAX	State VA	Zip Code 22032-1145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCCRAY, GREGORY, C., MR.,		Date of Receipt MM / DD / YYYY 07 / 31 / 2016
Mailing Address 9778 MAPLE TRACE CIRCLE		Transaction ID : SA11A.359457
City FAIRFAX	State VA	Zip Code 22032-1145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCCRAY, GREGORY, C., MR.,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 9778 MAPLE TRACE CIRCLE		Transaction ID : SA11A.373351
City FAIRFAX	State VA	Zip Code 22032-1145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 835.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3152 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCRAY, GREGORY, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9778 MAPLE TRACE CIRCLE

City FAIRFAX	State VA	Zip Code 22032-1145
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388864

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MCCRAY, GREGORY, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9778 MAPLE TRACE CIRCLE

City FAIRFAX	State VA	Zip Code 22032-1145
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388865

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MCCRERY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20005-3956
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPITOL COUNSEL, LLC	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367965

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3153 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCULLOUGH, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAWRENCE AVE
 City MALVERNE State NY Zip Code 11565-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS OFFICE MENTAL HEALTH Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353484
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCCULLOUGH, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAWRENCE AVE
 City MALVERNE State NY Zip Code 11565-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS OFFICE MENTAL HEALTH Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383137
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCCULLOUGH, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAWRENCE AVE
 City MALVERNE State NY Zip Code 11565-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS OFFICE MENTAL HEALTH Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391761
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3154 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCULLOUGH, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAWRENCE AVE
 City MALVERNE State NY Zip Code 11565-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS OFFICE MENTAL HEALTH Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391810
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCCULLOUGH, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAWRENCE AVE
 City MALVERNE State NY Zip Code 11565-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS OFFICE MENTAL HEALTH Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409057
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCCULLOUGH, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LAWRENCE AVE
 City MALVERNE State NY Zip Code 11565-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS OFFICE MENTAL HEALTH Occupation (for Individual) PSYCHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418662
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3155 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCUNE, BARRON, P., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 W CHESTNUT STREET
SUITE 100

City WASHINGTON State PA Zip Code 15301-4524

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 12 / 2016
Transaction ID : SA11A.392773

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. MCCUNE, NEDRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 424 E 16TH STREET

City COSTA MESA State CA Zip Code 92627-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
MARINERS MILE COMPANY PARTNER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
3000.00

Date of Receipt
09 / 09 / 2016
Transaction ID : SA11A.392490

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

C. MCCURDY, J., DONALD, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15907 LAURELFIELD DRIVE

City HOUSTON State TX Zip Code 77059-6431

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 12 / 2016
Transaction ID : SA11A.392889

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 3000.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3156 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCUTCHEN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6703 110TH AVE NE
 C 3
 City KIRKLAND State WA Zip Code 98033-7197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCUTCHEN REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350828
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. MCCUTCHEN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6703 110TH AVE NE
 C 3
 City KIRKLAND State WA Zip Code 98033-7197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCUTCHEN REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359878
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. MCCUTCHEN, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6703 110TH AVE NE
 C 3
 City KIRKLAND State WA Zip Code 98033-7197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCUTCHEN REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364747
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3158 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCUTCHEN, ALAN, , ,

Mailing Address 6703 110TH AVE NE
C 3

City KIRKLAND State WA Zip Code 98033-7197

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCUTCHEN REALTY Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11A.411577

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCUTCHEN, ALAN, , ,

Mailing Address 6703 110TH AVE NE
C 3

City KIRKLAND State WA Zip Code 98033-7197

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCUTCHEN REALTY Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016

Transaction ID : SA11A.414142

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCUTCHEN, ALAN, , ,

Mailing Address 6703 110TH AVE NE
C 3

City KIRKLAND State WA Zip Code 98033-7197

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCUTCHEN REALTY Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.419604

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3159 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDANOLDS, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 275
 City NORTH HAVERHILL State NH Zip Code 03774-0275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376758
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCDERMOTT, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22731 CHEROKEE ROSE PLACE
 City LAND O LAKES State FL Zip Code 34639-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCS COMPLIANCE CONSULTING Occupation (for Individual) SEMI-RETIRED CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349775
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCDERMOTT, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22731 CHEROKEE ROSE PLACE
 City LAND O LAKES State FL Zip Code 34639-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCS COMPLIANCE CONSULTING Occupation (for Individual) SEMI-RETIRED CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353816
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3160 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDONALD, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 GOOD HOPE DRIVE
 City CASTLE ROCK State CO Zip Code 80108-9075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409492
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. MCDONNELL, ELIZABETH, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 GLEN EAGLES DR
 City ST. LOUIS State MO Zip Code 63124-1653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 38800.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.358864
 Amount of Each Receipt this Period 38800.00
 Memo Item
CONTRIBUTION

C. MCDONALD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1547
 City GREENWOOD State SC Zip Code 29648-1547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393000
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	41550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3161 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDONNELL, JAMES, S., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 GLEN EAGLES DR
 City SAINT LOUIS State MO Zip Code 63124-1653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 38400.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.358859
 Amount of Each Receipt this Period 38400.00
 Memo Item CONTRIBUTION

B. MCDONALD, JOSEPH, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 DORCHESTER RD
 City BUFFALO State NY Zip Code 14222-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CATHOLIC HEALTH Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.375449
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MCDONALD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2018 HIDDEN CREST DRIVE
 City EL CAJON State CA Zip Code 92019-3655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397281
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	39700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3162 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDUGAL, SIDNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 518
 City CRESWELL State OR Zip Code 97426-0518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394907
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. MCDOWELL, BRADLEY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 N ARROW CREST WAY
 City BOISE State ID Zip Code 83703-7002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGRIBEEF Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.367887
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MCDOWELL, JOEL, T., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2040 SPRINGHILL CT
 City BIRMINGHAM State AL Zip Code 35242-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIDWELL GROUP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11A.395810
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	14500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3163 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCELHANEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 267 SHARP MOUNTAIN PKWY

City JASPER	State GA	Zip Code 30143-4860
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2016

Transaction ID : SA11A.344236

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. MCELHANEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 267 SHARP MOUNTAIN PKWY

City JASPER	State GA	Zip Code 30143-4860
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.359995

Amount of Each Receipt this Period
118.00

Memo Item
CONTRIBUTION

C. MCELHANEY, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 267 SHARP MOUNTAIN PKWY

City JASPER	State GA	Zip Code 30143-4860
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374143

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	227.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3164 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCELROY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 829 FRANKLIN STREET

City VINEYARD HVN	State MA	Zip Code 02568-5112
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.365944

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MCENANEY, THOMAS, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 HALSTED DRIVE

City MANCHESTER	State NJ	Zip Code 08759-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411134

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MCENANEY, THOMAS, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 HALSTED DRIVE

City MANCHESTER	State NJ	Zip Code 08759-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411137

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3165 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCFADDEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2820 S GERMANTOWN ROAD
 City GERMANTOWN State TN Zip Code 38138-7001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396961
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353525
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353527
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3166 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363841
 Amount of Each Receipt this Period 59.00
 Memo Item
CONTRIBUTION

B. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382595
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385179
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 109.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3167 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400091
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400092
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. MCFARLAND, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81799 PRISM DR.
 City LA QUINTA State CA Zip Code 92253-7720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUSCO FAMILY OLIVE CO. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415866
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3168 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCFERRIN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 BEVERLY ROAD NE
 City ATLANTA State GA Zip Code 30309-2655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U. S. ELECTRIC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385849
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCGAUGHY, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 EAST ST NE
 City VIENNA State VA Zip Code 22180-3577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349520
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCGEE, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 ST MELLION DR
 City PRESTO State PA Zip Code 15142-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413308
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3169 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGEE, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 ST MELLION DR
 City PRESTO State PA Zip Code 15142-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413328
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MCGEE, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1070 ST MELLION DR
 City PRESTO State PA Zip Code 15142-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413330
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MCGEE, ODIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11321 CR 525
 City MANSFIELD State TX Zip Code 76063-7132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396851
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3170 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGEE, ODIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11321 CR 525
 City MANSFIELD State TX Zip Code 76063-7132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396856
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCGEE, THOMAS, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 WESTBOROUGH DRIVE
 City SIMSBURY State CT Zip Code 06089-9786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMP CORPORATION Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406678
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MCGILL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91-522 NUKUAWA
 City KAPOLEI State HI Zip Code 96707-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECH CORP Occupation (for Individual) CONTRACTING/EXECUTIVE RME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.357767
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3171 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCGINN, KAREN, , ,

Mailing Address 5383 TREVINO DRIVE

City HAYMARKET State VA Zip Code 20169-3160

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016

Transaction ID : SA11A.348262

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCGINN, KAREN, , ,

Mailing Address 5383 TREVINO DRIVE

City HAYMARKET State VA Zip Code 20169-3160

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.349628

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCGINN, KAREN, , ,

Mailing Address 5383 TREVINO DRIVE

City HAYMARKET State VA Zip Code 20169-3160

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11A.355435

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3172 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGINN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 TREVINO DRIVE
 City HAYMARKET State VA Zip Code 20169-3160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366595
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MCGINN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 TREVINO DRIVE
 City HAYMARKET State VA Zip Code 20169-3160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398372
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MCGINN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 TREVINO DRIVE
 City HAYMARKET State VA Zip Code 20169-3160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.401004
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3173 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGINN, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 TREVINO DRIVE
 City HAYMARKET State VA Zip Code 20169-3160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414244
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCGOVERN, PATTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 968 HARBOR RD
 City SOUTHPORT State CT Zip Code 06890-1469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLDWELL BANKER REAL ESTATE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376348
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCGOVERN, PATTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 968 HARBOR RD
 City SOUTHPORT State CT Zip Code 06890-1469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLDWELL BANKER REAL ESTATE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376350
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3174 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGOVERN, PATTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 968 HARBOR RD
 City SOUTHPORT State CT Zip Code 06890-1469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLDWELL BANKER REAL ESTATE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398328
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCGRAY, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 MYSTIC BREEZE
 City SPRING BRANCH State TX Zip Code 78070-5083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWRENCE K. MCGRAY Occupation (for Individual) PROJECT ESTIMATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2016
Transaction ID : SA11A.346676
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCGRATH, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 KLINGLE ST NW
 City WASHINGTON State DC Zip Code 20016-3576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354152
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3175 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGRATH, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 KLINGLE ST NW
 City WASHINGTON State DC Zip Code 20016-3576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402557
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCGRATH, MOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 SASCO HILL ROAD
 City FAIRFIELD State CT Zip Code 06824-6346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379926
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MCGREEVY, NORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 DUNAWAY DRIVE
 City MCLEAN State VA Zip Code 22101-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DESIGN BY NORIS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354508
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 710.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3176 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCGREEVY, NORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 DUNAWAY DRIVE
 City MCLEAN State VA Zip Code 22101-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DESIGN BY NORIS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379978
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

B. MCGREEVY, NORIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 DUNAWAY DRIVE
 City MCLEAN State VA Zip Code 22101-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DESIGN BY NORIS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408705
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

C. MCGUIRE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2028 PRATHER AVE.
 City ST. LOUIS State MO Zip Code 63139-3528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US BANK Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388216
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 720.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3177 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCILWAIN, MATT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5736 64TH AVE NE
 City SEATTLE State WA Zip Code 98105-2042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MADRONA VENTURE GROUP Occupation (for Individual) VENTURE CAPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 07 / 2016
Transaction ID : SA11A.363283
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. MCINERNEY, PAULA, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MANITOU COURT
 City WESTPORT State CT Zip Code 06880-6006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUFF POINT ASSOC CORP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.379198
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. MCINNES, HAROLD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 WINDING WAY
 City CAMP HILL State PA Zip Code 17011-8463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381458
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 52750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3178 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCINTOSH, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11548 E. CARIBBEAN LANE
 City SCOTTSDALE State AZ Zip Code 85255-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVANADE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359141
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MCINTOSH, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11548 E. CARIBBEAN LANE
 City SCOTTSDALE State AZ Zip Code 85255-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVANADE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385987
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCINTOSH, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11548 E. CARIBBEAN LANE
 City SCOTTSDALE State AZ Zip Code 85255-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVANADE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385995
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3179 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCINTOSH, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11548 E. CARIBBEAN LANE
 City SCOTTSDALE State AZ Zip Code 85255-8948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVANADE Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385997
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCINTIRE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 910 WELLINGTON ROAD
 City BALTIMORE State MD Zip Code 21212-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370936
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCIVER, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7860 SW NORTHVALE WAY
 City PORTLAND State OR Zip Code 97225-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMERCE PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370929
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3180 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKAY, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 N. FORTNER RD
 City PECK State KS Zip Code 67120-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERTZ Occupation (for Individual) TRANSPORTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358426
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCKAY, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 N. FORTNER RD
 City PECK State KS Zip Code 67120-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERTZ Occupation (for Individual) TRANSPORTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366706
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCKAY, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 N. FORTNER RD
 City PECK State KS Zip Code 67120-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERTZ Occupation (for Individual) TRANSPORTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391080
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3181 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKAY, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 N. FORTNER RD
 City PECK State KS Zip Code 67120-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERTZ Occupation (for Individual) TRANSPORTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405005
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCKAY, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 N. FORTNER RD
 City PECK State KS Zip Code 67120-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERTZ Occupation (for Individual) TRANSPORTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413514
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCKAY, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8805 OLD CREEK RD
 City MEMPHIS State TN Zip Code 38125-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRIFFIN, INC Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350462
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 3182 OF 5722
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCKAY, GREGORY, , ,

Mailing Address 8805 OLD CREEK RD

City MEMPHIS	State TN	Zip Code 38125-4020
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRIFFIN, INC	Occupation (for Individual) MGR
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372511

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCKAY, GREGORY, , ,

Mailing Address 8805 OLD CREEK RD

City MEMPHIS	State TN	Zip Code 38125-4020
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRIFFIN, INC	Occupation (for Individual) MGR
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399874

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCKAY, GREGORY, , ,

Mailing Address 8805 OLD CREEK RD

City MEMPHIS	State TN	Zip Code 38125-4020
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GRIFFIN, INC	Occupation (for Individual) MGR
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402446

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3183 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKEEN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 702
 City FORT WORTH State TX Zip Code 76107-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359390
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. MCKEEN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 702
 City FORT WORTH State TX Zip Code 76107-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383996
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. MCKEEN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 702
 City FORT WORTH State TX Zip Code 76107-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393989
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3184 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKEEN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 702
 City FORT WORTH State TX Zip Code 76107-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCKEEN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 702
 City FORT WORTH State TX Zip Code 76107-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397881
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCKEEN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 702
 City FORT WORTH State TX Zip Code 76107-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397896
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3185 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKEEN, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 702
 City FORT WORTH State TX Zip Code 76107-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403221
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MCKEE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 BOXWOOD TRAIL
 City LOCUST GROVE State VA Zip Code 22508-5730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.377475
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. MCKEE, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 159
 City CORNELIUS State NC Zip Code 28031-0159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.395906
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3186 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCKEEVER, MICHAEL, E., DR., DDS

Mailing Address 7670 PRINCEVALLE ST

City GILROY	State CA	Zip Code 95020-5022
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11A.380499

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCKEEVER, MICHAEL, E., DR., DDS

Mailing Address 7670 PRINCEVALLE ST

City GILROY	State CA	Zip Code 95020-5022
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11A.380500

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCKEEVER, MICHAEL, E., DR., DDS

Mailing Address 7670 PRINCEVALLE ST

City GILROY	State CA	Zip Code 95020-5022
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11A.380507

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3187 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCKEEVER, MICHAEL, E., DR., DDS

Mailing Address 7670 PRINCEVALLE ST

City GILROY	State CA	Zip Code 95020-5022
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380508

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCKEEVER, MICHAEL, E., DR., DDS

Mailing Address 7670 PRINCEVALLE ST

City GILROY	State CA	Zip Code 95020-5022
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385998

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCKEEVER, MICHAEL, E., DR., DDS

Mailing Address 7670 PRINCEVALLE ST

City GILROY	State CA	Zip Code 95020-5022
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386000

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3188 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKEEVER, MICHAEL, E., DR., DDS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7670 PRINCEVALLE ST
 City GILROY State CA Zip Code 95020-5022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.391988
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. MCKEEVER, MICHAEL, E., DR., DDS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7670 PRINCEVALLE ST
 City GILROY State CA Zip Code 95020-5022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396758
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCKEEVER, MICHAEL, E., DR., DDS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7670 PRINCEVALLE ST
 City GILROY State CA Zip Code 95020-5022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399503
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3189 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKENNA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8338 AUSTIN AVENUE
 City MORTON GROVE State IL Zip Code 60053-3209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHWARZ SUPPLY SOURCE Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 38000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.393891
 Amount of Each Receipt this Period 38000.00
 Memo Item CONTRIBUTION

B. MCKENZIE, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 176 STABLEWOOD LANE
 City KERRVILLE State TX Zip Code 78028-7647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA ASSOCIATES OF KERRVILLE, PL Occupation (for Individual) ANESTHESIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370224
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCKENZIE, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 176 STABLEWOOD LANE
 City KERRVILLE State TX Zip Code 78028-7647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA ASSOCIATES OF KERRVILLE, PL Occupation (for Individual) ANESTHESIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416026
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	38350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3190 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKENNA, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5770 HARBORAGE DRIVE
 City FORT MYERS State FL Zip Code 33908-4548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358643
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCKENZIE, TRACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1298 E GREEN MEADOW LANE
 City GREENWOOD VILLAGE State CO Zip Code 80121-1321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358305
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MCKENZIE, TRACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1298 E GREEN MEADOW LANE
 City GREENWOOD VILLAGE State CO Zip Code 80121-1321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382458
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3191 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKIBBEN, LYDIA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1407 POST OAK PLACE

City WESTLAKE	State TX	Zip Code 76262-9037
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
497.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383364

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MCKIBBEN, LYDIA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1407 POST OAK PLACE

City WESTLAKE	State TX	Zip Code 76262-9037
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
497.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399447

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MCKINNEY, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2313 VESTAVIA DRIVE

City VESTAVIA	State AL	Zip Code 35216-1331
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389424

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3192 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKINNEY, DANIEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1529 WOODRIDGE PLACE
 City BIRMINGHAM State AL Zip Code 35216-1657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCKINNEY CAPITAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414404
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

B. MCKINNEY, DARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 24TH STREET NE
 City WASHINGTON State DC Zip Code 20002-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383346
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. MCKINNEY, JAMES, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 LAKE ST
 City LIBERTYVILLE State IL Zip Code 60048-1728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM BLAIR AND CO Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354436
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3193 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCKINNON, JOHN, Q., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 229 E LAKE SHORE DRIVE UNIT 8W
8W

City CHICAGO State IL Zip Code 60611-1351

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WINTRUST FINANCIAL CORP Occupation (for Individual) BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361250

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. MCKINNEY, RODDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2456 MOUNTIAN VISTA DRIVE

City VESTAVIA HILLS State AL Zip Code 35243-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SATELLITES UNLIMITED Occupation (for Individual) EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412439

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. MCKNIGHT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7875 CALLE FACIL

City SARASOTA State FL Zip Code 34238-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PUBLISHER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385104

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3194 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLANAHAN, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 LOCKE LANE
 City HOUSTON State TX Zip Code 77027-4121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392653
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MCLANE, DRAYTON, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 549
 City TEMPLE State TX Zip Code 76503-0549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCLANE GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 60000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421192
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MCLAUGHLIN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 DOMINIC DRIVE
 City CUYAHOGA FALLS State OH Zip Code 44223-3801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FFP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353465
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3195 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLAUGHLIN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 DOMINIC DRIVE
 City CUYAHOGA FALLS State OH Zip Code 44223-3801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FFP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375745
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCLAUGHLIN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 DOMINIC DRIVE
 City CUYAHOGA FALLS State OH Zip Code 44223-3801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FFP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404249
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCLAUGHLIN, JOSEPH, J., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 INDIAN SPRING RD.
 City MEDIA State PA Zip Code 19063-1818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAVERFORD TRUST COMPANY Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407892
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3196 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLAUGHLIN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 DOCKSIDE DR.
 City JACKSONVILLE State NC Zip Code 28546-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONSLOW COUNTY Occupation (for Individual) ZONING OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.354870
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MCLAUGHLIN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 DOCKSIDE DR.
 City JACKSONVILLE State NC Zip Code 28546-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONSLOW COUNTY Occupation (for Individual) ZONING OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365857
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365163
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3197 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.365170
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378824
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378826
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3198 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391012
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393681
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406332
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3199 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLELLAND, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11543 WEST TICKS CIRCLR
 City DALLAS State TX Zip Code 75230-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409739
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MCLEOD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6913 HILL FOREST DRIVE
 City DALLAS State TX Zip Code 75230-2346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353814
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. MCLEOD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6913 HILL FOREST DRIVE
 City DALLAS State TX Zip Code 75230-2346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375748
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3200 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCLEOD, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6913 HILL FOREST DRIVE

City DALLAS	State TX	Zip Code 75230-2346
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.404192

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. MCLEOD, SHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4185 OAK RIDGE CIR

City DE PERE	State WI	Zip Code 54115-9233
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASPHALT SEAL & REPAIR	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2016

Transaction ID : SA11A.348922

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MCMAHON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17923 BRITTANY DR. SW

City NORMANDY PARK	State WA	Zip Code 98166-3617
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
233.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2016

Transaction ID : SA11A.358066

Amount of Each Receipt this Period
233.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	633.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3201 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMAHON, JOSEPH, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 814 WURLITZER DR
 City NORTH TONAWANDA State NY Zip Code 14120-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADUBON MACHINERY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385226
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCMAHON, LINDA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 FLEETWOOD ROAD UNIT 1123
 City MCLEAN State VA Zip Code 22101-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARYMOUNT UNIVERSITY Occupation (for Individual) PROFESSOR - EMERITUS - ADJUNC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417573
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. MCMAHON, TERRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 GLADWIN AVNUE
 City LEONIA State NJ Zip Code 07605-1912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCMAHON TECHNOLOGY ASSOC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373485
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2075.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3202 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMAHON, WILLIAM, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 CROESUS AVE
 City SAN ANTONIO State TX Zip Code 78213-4417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352338
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCMAHON, WILLIAM, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 CROESUS AVE
 City SAN ANTONIO State TX Zip Code 78213-4417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375868
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCMAHON, WILLIAM, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 CROESUS AVE
 City SAN ANTONIO State TX Zip Code 78213-4417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401467
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3203 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **07 / 13 / 2016**
Transaction ID : SA11A.347020
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366944
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.385172
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3204 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMANUS, JIM, H., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 88 CHESTNUT ST

City WESTON	State MA	Zip Code 02493-1533
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JIM MCMANUS	Occupation (for Individual) COMM. REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.385173

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MCMANUS, JIM, H., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 88 CHESTNUT ST

City WESTON	State MA	Zip Code 02493-1533
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JIM MCMANUS	Occupation (for Individual) COMM. REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394555

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MCMANUS, JIM, H., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 88 CHESTNUT ST

City WESTON	State MA	Zip Code 02493-1533
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JIM MCMANUS	Occupation (for Individual) COMM. REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.396889

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3205 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1050.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396890
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1050.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407781
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCMANUS, JIM, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 CHESTNUT ST
 City WESTON State MA Zip Code 02493-1533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JIM MCMANUS Occupation (for Individual) COMM. REAL ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1050.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407783
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3206 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCMANUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 863 WILLOW CREEK WAY
 City RENO State NV Zip Code 89509-5935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.385082
 Amount of Each Receipt this Period
 125.00
 Memo Item
 CONTRIBUTION

B. MCMANUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 863 WILLOW CREEK WAY
 City RENO State NV Zip Code 89509-5935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412380
 Amount of Each Receipt this Period
 125.00
 Memo Item
 CONTRIBUTION

C. MCMULLAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 THE BAY WAY NE
 City ATLANTA State GA Zip Code 30306-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392809
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3207 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNAIR, IRVING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 STANDISH DR
 City MORRISTOWN State NJ Zip Code 07960-3225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388176
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MCNAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5655 WHITECLIFF DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-4940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354763
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCNAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5655 WHITECLIFF DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-4940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374472
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3208 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5655 WHITECLIFF DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-4940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382613
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCNAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5655 WHITECLIFF DR.
 City RANCHO PALOS VERDE State CA Zip Code 90275-4940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410310
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCNALL, LESTER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 E COUNTRY HILLS DRIVE
 City LA HABRA State CA Zip Code 90631-7625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357322
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3209 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNAMARA, CASSANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 QUAIL VIEW CIRCLE
 City CLIO State CA Zip Code 96106-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.396337
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. MCNAMARA, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25707 CREEKSIDE COVE
 City BOERNE State TX Zip Code 78006-8538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.360257
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. MCNAMARA, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3416 METAIRIE CT
 City METAIRIE State LA Zip Code 70002-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 212.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359250
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3210 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNAMARA, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3416 METAIRIE CT
 City METAIRIE State LA Zip Code 70002-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372625
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MCNAMARA, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3416 METAIRIE CT
 City METAIRIE State LA Zip Code 70002-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386914
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCNAMARA, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3416 METAIRIE CT
 City METAIRIE State LA Zip Code 70002-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400424
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 85.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3211 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNAMARA, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3416 METAIRIE CT
 City METAIRIE State LA Zip Code 70002-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405766
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MCNAMARA, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3416 METAIRIE CT
 City METAIRIE State LA Zip Code 70002-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412003
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MCNAMARA, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3416 METAIRIE CT
 City METAIRIE State LA Zip Code 70002-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419424
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3212 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNARY, WILSON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1315 VERANO DRIVE

City PALM SPRINGS	State CA	Zip Code 92264-8449
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.369252

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MCNEEL, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32415 ARCHDALE

City CHAPEL HILL	State NC	Zip Code 27517-8398
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2016

Transaction ID : SA11A.357934

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. MCNEEL, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32415 ARCHDALE

City CHAPEL HILL	State NC	Zip Code 27517-8398
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2016

Transaction ID : SA11A.384443

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3213 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNEEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32415 ARCHDALE
 City CHAPEL HILL State NC Zip Code 27517-8398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384475
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCNEEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32415 ARCHDALE
 City CHAPEL HILL State NC Zip Code 27517-8398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419536
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCNEILL-SKORUPAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1810 THORSTRAND RD
 City MADISON State WI Zip Code 53705-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC ADVANTAGE SOLUTIONS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.347006
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3214 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNEILL-SKORUPAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1810 THORSTRAND RD
 City MADISON State WI Zip Code 53705-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC ADVANTAGE SOLUTIONS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366943
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCNEILL-SKORUPAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1810 THORSTRAND RD
 City MADISON State WI Zip Code 53705-1044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATEGIC ADVANTAGE SOLUTIONS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394548
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCNEILL, RONNIE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 MAGNOLIA DRIVE
 City WILMINGTON State NC Zip Code 28409-2800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY HEALTHCARE GROUP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400467
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3215 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNEIL, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 ROCKRIDGE TERRACE
 City FORT WORTH State TX Zip Code 76110-6642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408242
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MCNICHOLS , ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3333 PETERS CREEK ROAD NW
 City ROANOKE State VA Zip Code 24019-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSM, INC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386202
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCNICHOLS , ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3333 PETERS CREEK ROAD NW
 City ROANOKE State VA Zip Code 24019-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSM, INC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397710
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3216 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCNULTY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 S. LINDEN AVENUE
 City PITTSBURGH State PA Zip Code 15208-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARNEGIE MELLON UNIVERSITY Occupation (for Individual) ADMINISTRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362028
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MCPHERSON, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 PARNELL AVE, NE
 City LOWELL State MI Zip Code 49331-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362434
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCPHERSON, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 PARNELL AVE, NE
 City LOWELL State MI Zip Code 49331-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379059
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3217 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCPHERSON, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 PARNELL AVE, NE
 City LOWELL State MI Zip Code 49331-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379060
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCPHEETERS, BURTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23998 S MCPHEETERS ROAD
 City GOTHENBURG State NE Zip Code 69138-9351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365976
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MCPHERSON, MAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2135 205
 City JAMESTOWN State ND Zip Code 58402-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERRINGTON ENTERPRISES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.346002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3218 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCPHERSON, MAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2135
 205
 City JAMESTOWN State ND Zip Code 58402-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERRINGTON ENTERPRISES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2016
Transaction ID : SA11A.363345
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MCPHERSON, MAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2135
 205
 City JAMESTOWN State ND Zip Code 58402-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERRINGTON ENTERPRISES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364748
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MCPHERSON, MAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2135
 205
 City JAMESTOWN State ND Zip Code 58402-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHERRINGTON ENTERPRISES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390674
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3219 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCPHERSON, SCOTT, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 NORTH BEACON UNIT 310
 City LA GRANGE State IL Zip Code 60525-2066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCPHERSON PUBLIC AFFAIRS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391365
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MCRAE, FINLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 7
 City GRACEVILLE State FL Zip Code 32440-0007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REX LUMBER Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412480
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. MCREYNOLDS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14314 BEN BRUSH STREET
 City SAN ANTONIO State TX Zip Code 78248-1103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCREYNOLDS & TYE PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356506
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3220 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCREYNOLDS, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14314 BEN BRUSH STREET

City SAN ANTONIO	State TX	Zip Code 78248-1103
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCREYNOLDS & TYE PC	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379581

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MCREYNOLDS, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14314 BEN BRUSH STREET

City SAN ANTONIO	State TX	Zip Code 78248-1103
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCREYNOLDS & TYE PC	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414592

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MCSHERRY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6247 AUBURN LEAF LANE

City ALEXANDRIA	State VA	Zip Code 22312-3909
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MERCURY PUBLIC AFFAIRS	Occupation (for Individual) SR. VP
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.398460

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3221 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCSLARROW, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10333 MAIN STREET
426

City BELLEVUE	State WA	Zip Code 98004-6453
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMCAST	Occupation (for Individual) TELECOMMUNICATIONS EXECUTIVE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11A.398602

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

B. MCSWEENEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5041 LEXINGTON CIRCLE

City LOOMIS	State CA	Zip Code 95650-7107
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016

Transaction ID : SA11A.391633

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MCTIGUE, TERENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4056 W LAKE SAMMAMISH SE

City BELLEVUE	State WA	Zip Code 98008-5938
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.419182

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	27250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3222 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCVAY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2950 DEAN PARKWAY #2403
 City MINNEAPOLIS State MN Zip Code 55416-4587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.383497
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344453
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348620
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3223 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372159
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372162
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394393
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3224 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394402
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399867
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MCVEIGH III, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 COTTONDALE ROAD
 City THE HILLS State TX Zip Code 78738-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410912
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3225 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCWHIRTER, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7575 PELICAN BAY BOULEVARD
 PH 2007
 City NAPLES State FL Zip Code 34108-5542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379680
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MEAD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 W BAUER ROAD
 City NAPERVILLE State IL Zip Code 60563-1105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379742
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MEADE, EDWIN, B., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.345813
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3226 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEADE, EDWIN, B., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.356848
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MEADE, EDWIN, B., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369343
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MEADE, EDWIN, B., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.371181
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3227 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEADE, EDWIN, B., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 WESTBROOK COURT
 APT 3144
 City RICHMOND State VA Zip Code 23227-3373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406907
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MEADE, ROBERT, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ARRANDALE AVENUE
 City GREAT NECK State NY Zip Code 11024-1804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NY STATE Occupation (for Individual) ADMIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MEALEY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 RULOFSON STREET
 City SANTA CRUZ State CA Zip Code 95060-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376681
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3228 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEARS, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2400 MARGOLIN LANE

City CLEARWATER	State FL	Zip Code 33764-7518
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397362

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MECRAY, FRIEDA, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 638 ROLLING HILLS CIRCLE

City HONEY BROOK	State PA	Zip Code 19344-7721
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405275

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. MECRAY, FRIEDA, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 638 ROLLING HILLS CIRCLE

City HONEY BROOK	State PA	Zip Code 19344-7721
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405279

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3229 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MECRAY, FRIEDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 638 ROLLING HILLS CIRCLE
 City HONEY BROOK State PA Zip Code 19344-7721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418196
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. MEDLIN, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 N 35TH ST
 City MOREHEAD CITY State NC Zip Code 28557-3126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIABETES & ENDOCRINOLOGY CONSULTANTS, Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398488
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MEDLING, W. ROBERT, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 857 BRADFORD AVENUE
 City NASHVILLE State TN Zip Code 37204-2185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMERCIAL INS LLC Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417268
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3230 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MEDOUKOS, J. K., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2535
 City NEW YORK State NY Zip Code 10021-0059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDMCO Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379356
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MEDOUKOS, J. K., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2535
 City NEW YORK State NY Zip Code 10021-0059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDMCO Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390807
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MEEHAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 LIBERTY AVENUE APT 1011
 City PITTSBURGH State PA Zip Code 15222-4247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365334
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3231 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEEHAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 LIBERTY AVENUE
 APT 1011

City PITTSBURGH	State PA	Zip Code 15222-4247
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.401757

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

B. MEEHL, DAVID, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11160 COLE ROAD

City NORTH EAST	State PA	Zip Code 16428-5256
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016

Transaction ID : SA11A.347798

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

C. MEHLMAN, KENNETH, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 WEST 57TH ST, STE 4200

City WASHINGTON	State NY	Zip Code 10019-2707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KOHLMAN KRAVIS ROBERTS & CO	Occupation (for Individual) GLOBAL PUBLIC AFFAIRS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 5400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11A.375443

Amount of Each Receipt this Period
 5400.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3232 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEHRER, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 W 70TH STREET
 City MISSION HILLS State KS Zip Code 66208-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378218
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MEHTA, MUKUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 GREENCEDAR DRIVE
 City BEL AIR State MD Zip Code 21015-6379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUKUL M MEHTA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384157
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MEHTA, MUKUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 GREENCEDAR DRIVE
 City BEL AIR State MD Zip Code 21015-6379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUKUL M MEHTA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384158
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3233 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEHTA, MUKUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 GREENCEDAR DRIVE
 City BEL AIR State MD Zip Code 21015-6379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUKUL M MEHTA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384893
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MEHTA, MUKUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 GREENCEDAR DRIVE
 City BEL AIR State MD Zip Code 21015-6379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUKUL M MEHTA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384894
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MEHTA, MUKUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2202 GREENCEDAR DRIVE
 City BEL AIR State MD Zip Code 21015-6379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUKUL M MEHTA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384895
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3234 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEIDL, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 WATERSTONE DRIVE
 City FRANKLIN State TN Zip Code 37069-7197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374887
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MEIDL, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 WATERSTONE DRIVE
 City FRANKLIN State TN Zip Code 37069-7197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415484
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. MEIER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6257 STEFANI DRIVE
 City DALLAS State TX Zip Code 75225-2122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397011
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3235 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEIGS, CL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 S. MAIN
 City PRATT State KS Zip Code 67124-2661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384249
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MEIGS, CL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 S. MAIN
 City PRATT State KS Zip Code 67124-2661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418590
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MEIGS, CL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 S. MAIN
 City PRATT State KS Zip Code 67124-2661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419533
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

250.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3236 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEIKE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 SUSSEX ROAD
 City KAYCEE State WY Zip Code 82639-9625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383599
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MEIKE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 SUSSEX ROAD
 City KAYCEE State WY Zip Code 82639-9625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405162
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MEIKE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1737 SUSSEX ROAD
 City KAYCEE State WY Zip Code 82639-9625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419503
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3237 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1406

City LE MARS	State IA	Zip Code 51031-1406
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409724

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MEISLER, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9270 TIMBERCREEK BLVD.

City SPANISH FORT	State AL	Zip Code 36527-8605
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELA HALO LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390876

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MELIS, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 SKYTOP CIRCLE

City CHARLESTON	State WV	Zip Code 25314-2222
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422243

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3238 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MELODY, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 1/2 N WASHINGTON ST
 City NEW PARIS State OH Zip Code 45347-1152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MOLDMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383796
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MELODY, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 1/2 N WASHINGTON ST
 City NEW PARIS State OH Zip Code 45347-1152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MOLDMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412345
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MELTON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 TAL STRASSE
 City BELLAIRE State MI Zip Code 49615-8926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3239 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MELTON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 TAL STRASSE
 City BELLAIRE State MI Zip Code 49615-8926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357092
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MELTON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 TAL STRASSE
 City BELLAIRE State MI Zip Code 49615-8926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384293
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MELTON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 TAL STRASSE
 City BELLAIRE State MI Zip Code 49615-8926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384343
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3240 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MENDELSON, TIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 E. CROOKED CREEK LANE

City HENDERSONVILLE	State NC	Zip Code 28739-6977
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380240

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MENTZER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4611 HAWTHORNE LANE NW

City WASHINGTON	State DC	Zip Code 20016-3437
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN CONTINENTAL GROUP	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367968

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. MERCER, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 ROUTE 25A

City EAST SETAUKET	State NY	Zip Code 11733-1235
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
241500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.395188

Amount of Each Receipt this Period
244200.00

Memo Item
CONTRIBUTION

REFUNDED \$2,700.00 ON 09/28/2016

SUBTOTAL of Receipts This Page (optional).....	254450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3241 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MERCER, ROBERT, L., ,

Mailing Address 600 ROUTE 25A

City EAST SETAUKET	State NY	Zip Code 11733-1235
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RENAISSANCE TECHNOLOGIES	Occupation (for Individual) FINANCIAL CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11A.395189

Amount of Each Receipt this Period
244200.00

Memo Item
CONTRIBUTION

REFUNDED \$2,700.00 ON 09/28/2016

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MERCHANT, ROBERT, , ,

Mailing Address 2405 PERCH COVE

City GAUTIER	State MS	Zip Code 39553-6709
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LEADERSHIP CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11A.399395

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MERCHANT, ROBERT, , ,

Mailing Address 2405 PERCH COVE

City GAUTIER	State MS	Zip Code 39553-6709
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LEADERSHIP CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.402580

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	244400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3242 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERCHENT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 PERCH COVE
 City GAUTIER State MS Zip Code 39553-6709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LEADERSHIP CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402581
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MERCKENS, LOUETTA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 E HILTON AVENUE
 City REDLANDS State CA Zip Code 92373-6843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356592
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MERRILL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 POST OAK BLVD 550
 City HOUSTON State TX Zip Code 77056-3029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TANGLEWOOD WEALTH MANAGEMENT Occupation (for Individual) WEALTH MANAGER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405175
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3243 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRILL, LINDA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 399 LONG RIDGE ROAD
 City BEDFORD State NY Zip Code 10506-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414714
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. MERRICK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 ELLE CT
 City BARRINGTON State IL Zip Code 60010-9353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTI INDUSTRIES CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359895
 Amount of Each Receipt this Period 59.00
 Memo Item
 CONTRIBUTION

C. MERRICK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 ELLE CT
 City BARRINGTON State IL Zip Code 60010-9353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTI INDUSTRIES CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370806
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 359.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3244 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRICK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 ELLE CT
 City BARRINGTON State IL Zip Code 60010-9353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTI INDUSTRIES CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384785
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. MERRICK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 ELLE CT
 City BARRINGTON State IL Zip Code 60010-9353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTI INDUSTRIES CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419597
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. MERRITT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3009 NATHANIELS GREEN
 City WILLIAMSBURG State VA Zip Code 23185-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374308
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 218.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3245 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRITT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3009 NATHANIELS GREEN

City WILLIAMSBURG	State VA	Zip Code 23185-7505
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.385177

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MERRITT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3009 NATHANIELS GREEN

City WILLIAMSBURG	State VA	Zip Code 23185-7505
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397767

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MERRITT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3009 NATHANIELS GREEN

City WILLIAMSBURG	State VA	Zip Code 23185-7505
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397800

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3246 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MERRITT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3009 NATHANIELS GREEN
 City WILLIAMSBURG State VA Zip Code 23185-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413083
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353879
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355501
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3247 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356363
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.362581
 Amount of Each Receipt this Period 54.00
 Memo Item CONTRIBUTION

C. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365162
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	106.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3248 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366792
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380837
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380838
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3249 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394554
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MESNER WASZAK, SUSAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 NORTH LEE'S WAY
 City PAYSON State AZ Zip Code 85541-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400927
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. METRICK, MARYFRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 267 IVY HILL RD
 City RIDGEFIELD State CT Zip Code 06877-5109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406257
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3250 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. METRICK, MARYFRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 267 IVY HILL RD
 City RIDGEFIELD State CT Zip Code 06877-5109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420116
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. METZ, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 728
 City SHARON State CT Zip Code 06069-0728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380950
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. METZLER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 CHESTNUT STREET
 City BOSTON State MA Zip Code 02108-3640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366062
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1025.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3251 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1170 EAST RUBIO
 City ALTADENA State CA Zip Code 91001-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385624
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MEYE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1170 EAST RUBIO
 City ALTADENA State CA Zip Code 91001-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400689
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. MEYE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1170 EAST RUBIO
 City ALTADENA State CA Zip Code 91001-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400690
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3252 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYER, ANN, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5378 N VIA SEMPREVERDE
 City TUCSON State AZ Zip Code 85750-5971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371019
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MEYER, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 PEARSON STREET, APT 804 APT 804
 City DES PLAINES State IL Zip Code 60016-9219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376932
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MEYER, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 PEARSON STREET, APT 804 APT 804
 City DES PLAINES State IL Zip Code 60016-9219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411857
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3253 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYER, JIMMY, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8103 ROLLING KNOLL COURT
 City SPRINGFIELD State VA Zip Code 22153-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366263
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MEYER, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7328 MELODRIA TERRACE
 City CARLSBAD State CA Zip Code 92011-4863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383496
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MEYER, ORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 3RD AVE SE
 City PACIFIC State WA Zip Code 98047-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3254 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYER, ORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 3RD AVE SE
 City PACIFIC State WA Zip Code 98047-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374629
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. MEYER, ORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 3RD AVE SE
 City PACIFIC State WA Zip Code 98047-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374632
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MEYER, ORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 3RD AVE SE
 City PACIFIC State WA Zip Code 98047-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374692
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 70.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3255 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYER, ORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 3RD AVE SE
 City PACIFIC State WA Zip Code 98047-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399697
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MEYER, ORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 3RD AVE SE
 City PACIFIC State WA Zip Code 98047-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419406
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MEYER, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29304 E PINK HILL ROAD
 City GRAIN VALLEY State MO Zip Code 64029-9257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEYER LABORATORY INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401089
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3256 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEYER, STAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 NO 6TH ST
 City BEATRICE State NE Zip Code 68310-1264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357615
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MEZZINA, CORRADO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 NORTH WATER ST B505
 City NORWALK State CT Zip Code 06854-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382336
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MEZZINA, CORRADO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 NORTH WATER ST B505
 City NORWALK State CT Zip Code 06854-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411673
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3257 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MICHAELS, WILLIAM, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15802 N.71ST ST #757
 City SCOTTSDALE State AZ Zip Code 85254-7116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407479
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MICKELSON, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1828
 City DUNEDIN State FL Zip Code 34697-1828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396361
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MIDDENDORF, EDWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 SOUTHRIDGE EAST
 City TIBURON State CA Zip Code 94920-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358341
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3258 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIDDENDORF, EDWARD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 SOUTHRIDGE EAST
 City TIBURON State CA Zip Code 94920-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382433
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MIDDLETON, ANTHONY, WAYNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2798 E CHANCELLOR PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA Occupation (for Individual) DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356606
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MIDDLETON, ANTHONY, WAYNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2798 E CHANCELLOR PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA Occupation (for Individual) DOCTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368082
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3259 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIDDLETON, ANTHONY, WAYNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2798 E CHANCELLOR PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VA Occupation (for Individual) DOCTOR
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377082
 Amount of Each Receipt this Period 35.00
 Memo Item
 CONTRIBUTION

B. MIDDLETON, LEIGH, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 FEHLEY DR
 City KING OF PRUSSIA State PA Zip Code 19406-2612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOCK STREET CAPITAL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.356851
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

C. MIDKIFF, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 HUMBLE AVENUE
 City MIDLAND State TX Zip Code 79705-8623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389438
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3035.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3260 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIELE, JOSEPH, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 NE OUTRIGGER LANDINGS DRIVE
 City JENSEN BEACH State FL Zip Code 34957-6506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351115
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MIKELSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1337 N CASTLEWOOD DRIVE
 City FRANKTOWN State CO Zip Code 80116-9015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359070
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MIKK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 PINEBACK COURT
 City BRINKLOW State MD Zip Code 20862-9716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373791
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3261 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILAM, JOAN, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2673 CENTER COURT DRIVE
 City WESTON State FL Zip Code 33332-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 05 / 2016**
Transaction ID : SA11A.345242
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MILAM, JOAN, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2673 CENTER COURT DRIVE
 City WESTON State FL Zip Code 33332-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 08 / 2016**
Transaction ID : SA11A.361496
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MILAM, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11927 ARBORDALE LANE
 City HOUSTON State TX Zip Code 77024-5001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383273
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3262 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILAM, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 HINSON ROAD
 City EL DORADO State AR Zip Code 71730-9766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILAM CONSTRUCTION COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377118
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. MILBRODT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1926 HARDING AVE.
 City ALTADENA State CA Zip Code 91001-3507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415179
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MILES, ASHLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHERATON DRIVE
 City SAN ANTONIO State TX Zip Code 78209-5453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIDS EPISCOPAL SCHOOL Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392405
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3263 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILITELLO, JOHN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 493 KENNEDY RD
 City BUFFALO State NY Zip Code 14227-1039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PLUMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385236
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MILITELLO, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44220 RIVERPOINT DR
 City LANSLOWNE State VA Zip Code 20176-8247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIEDMONT INVESTMENT ADVISORS LLC Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421194
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MILLAR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6121 EAST 91ST PLACE
 City TULSA State OK Zip Code 74137-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385718
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3264 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLAR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6121 EAST 91ST PLACE
 City TULSA State OK Zip Code 74137-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391833
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. MILLAR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6121 EAST 91ST PLACE
 City TULSA State OK Zip Code 74137-4102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407695
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MILLARD, REX, V., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8604 YAMAMOTO STREET
 City LAS VEGAS State NV Zip Code 89131-2085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382630
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	380.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3265 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6274 WILLOWGATE
 City DALLAS State TX Zip Code 75230-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.343882
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MILLER, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 E. 75 ST. 7A
 City NEW YORK State NY Zip Code 10021-2762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **08 / 02 / 2016**
Transaction ID : SA11A.358896
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MILLER, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 E. 75 ST. 7A
 City NEW YORK State NY Zip Code 10021-2762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.377123
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3266 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 E. 75 ST.
7A

City NEW YORK State NY Zip Code 10021-2762

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2016

Transaction ID : SA11A.399288

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MILLER, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15922 71ST ST. NE

City ELK RIVER State MN Zip Code 55330-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2016

Transaction ID : SA11A.348317

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MILLER, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15922 71ST ST. NE

City ELK RIVER State MN Zip Code 55330-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2016

Transaction ID : SA11A.352489

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3267 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15922 71ST ST. NE
City ELK RIVER State MN Zip Code 55330-4801
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368731
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MILLER, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15922 71ST ST. NE
City ELK RIVER State MN Zip Code 55330-4801
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.398688
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MILLER, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15922 71ST ST. NE
City ELK RIVER State MN Zip Code 55330-4801
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410524
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3268 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, CHRISTOPHER, M.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9014 139TH AVE SW
 City NEWCASTLE State WA Zip Code 98059-3474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367933
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MILLER, DONALD, K.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 VIA TORTUGA
 City PALM BEACH State FL Zip Code 33480-3638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXIOM INVESTORS Occupation (for Individual) ASSET MANAGEMENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391528
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. MILLER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18400 BALMORE PINES LANE
 City CORNELIUS State NC Zip Code 28031-5204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COGENTRIX ENERGY POWER MANAGE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 318.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352534
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3269 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2291 CANYON COURT
 City ANN ARBOR State MI Zip Code 48105-9259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF MICHIGAN Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 02 / 2016
Transaction ID : SA11A.360075
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. MILLER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18400 BALMORE PINES LANE
 City CORNELIUS State NC Zip Code 28031-5204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COGENTRIX ENERGY POWER MANAGE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 318.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407798
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MILLER, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 480
 City LOCKPORT State NY Zip Code 14095-0480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLER COMM. REAL ESTATE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.391524
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3270 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, GLYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 755 S. EDGEVIEW CIRCLE
 City ANAHEIM State CA Zip Code 92808-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLYNNE D MILLER Occupation (for Individual) SALES/MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348513
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MILLER, GLYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 755 S. EDGEVIEW CIRCLE
 City ANAHEIM State CA Zip Code 92808-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLYNNE D MILLER Occupation (for Individual) SALES/MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 17 / 2016**
Transaction ID : SA11A.348996
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MILLER, GLYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 755 S. EDGEVIEW CIRCLE
 City ANAHEIM State CA Zip Code 92808-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLYNNE D MILLER Occupation (for Individual) SALES/MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372313
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3271 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, GRACE, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4760 ASTON GARDENS APT 206
 206
 City NAPLES State FL Zip Code 34109-3592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385778
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MILLER, GRACE, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4760 ASTON GARDENS APT 206
 206
 City NAPLES State FL Zip Code 34109-3592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408816
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. MILLER, GRACE, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4760 ASTON GARDENS APT 206
 206
 City NAPLES State FL Zip Code 34109-3592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 3550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414735
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3272 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416636
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. MILLER, H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416638
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. MILLER, H., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416639
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	83.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3273 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, H., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2532 DOVER LANE

City ST JOSEPH	State MI	Zip Code 49085-2702
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
283.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416691

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MILLER, H., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2532 DOVER LANE

City ST JOSEPH	State MI	Zip Code 49085-2702
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
283.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416709

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MILLER, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 RICK ROAD

City MILFORD	State NJ	Zip Code 08848-2112
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392892

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3274 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, HARVEY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1538 BRAE BURN CT
 City RIVERWOODS State IL Zip Code 60015-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5900.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400506
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. MILLER, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386805
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MILLER, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386808
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3275 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420268
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MILLER, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420336
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MILLER, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2532 DOVER LANE
 City ST JOSEPH State MI Zip Code 49085-2702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420337
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3276 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 ROUND HILL ROAD
 City GREENWICH State CT Zip Code 06831-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARBLEGATE ASSET MANAGEMENT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348119
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. MILLER, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4208 SHENANDOAH ST
 City DALLAS State TX Zip Code 75205-2024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENRY S MILLER PARTNERS Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359368
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MILLER, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 2501
 City FORT WORTH State TX Zip Code 76113-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALTOM'S Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408409
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3277 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MILLER, JANE, , ,		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 10440 TOMAHAWK RD		Transaction ID : SA11A.357981
City PARKER	State CO	Zip Code 80138-7825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MILLER, JANE, , ,		Date of Receipt MM / DD / YYYY 09 / 15 / 2016
Mailing Address 10440 TOMAHAWK RD		Transaction ID : SA11A.397828
City PARKER	State CO	Zip Code 80138-7825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MILLER, JANE, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 10440 TOMAHAWK RD		Transaction ID : SA11A.418370
City PARKER	State CO	Zip Code 80138-7825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 725.00	

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3278 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10440 TOMAHAWK RD
City PARKER State CO Zip Code 80138-7825
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418374
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MILLER, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 MARION AVENUE
City ALBANY State NY Zip Code 12203-1814
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409627
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MILLER, JIM, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 1228
City SAINT CLOUD State MN Zip Code 56302-1228
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364375
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3279 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 CLUBHOUSE DR.
 258
 City NAPLES State FL Zip Code 34105-2940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380234
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. MILLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 CLUBHOUSE DR.
 258
 City NAPLES State FL Zip Code 34105-2940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407497
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. MILLER, JUDITH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23060 SHADY KNOLL DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350519
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3280 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, JUDITH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23060 SHADY KNOLL DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383134
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MILLER, JUDITH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23060 SHADY KNOLL DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383135
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MILLER, JUDITH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23060 SHADY KNOLL DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383136
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3281 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, JUDITH, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23060 SHADY KNOLL DRIVE
 City BONITA SPRINGS State FL Zip Code 34135-2034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411254
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MILLER, KARL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1850 N SHORE
 City LAKE OSWEGO State OR Zip Code 97034-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVAMERE GROUP, INC. Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381562
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MILLER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 GENEVA ST
 City BELLINGHAM State WA Zip Code 98229-2681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE FIRS Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344439
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3282 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 WESTVIEW CIR

City ANCHORAGE	State AK	Zip Code 99504-2936
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356341

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MILLER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1125 GENEVA ST

City BELLINGHAM	State WA	Zip Code 98229-2681
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE FIRS	Occupation (for Individual) BOOKKEEPER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.359034

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MILLER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 WESTVIEW CIR

City ANCHORAGE	State AK	Zip Code 99504-2936
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.383092

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3283 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1125 GENEVA ST

City BELLINGHAM	State WA	Zip Code 98229-2681
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE FIRS	Occupation (for Individual) BOOKKEEPER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387876

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MILLER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 WESTVIEW CIR

City ANCHORAGE	State AK	Zip Code 99504-2936
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411325

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MILLER, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4402 BOXWOOD ROAD

City BETHESDA	State MD	Zip Code 20816-1818
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357608

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3284 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT 2 #414 WEAVER RD
 City ELKINS State WV Zip Code 26241-9645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SOCIAL SER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349756
 Amount of Each Receipt this Period 103.00
 Memo Item CONTRIBUTION

B. MILLER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT 2 #414 WEAVER RD
 City ELKINS State WV Zip Code 26241-9645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SOCIAL SER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352742
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MILLER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RT 2 #414 WEAVER RD
 City ELKINS State WV Zip Code 26241-9645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SOCIAL SER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400023
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	303.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3285 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 BARRINGTON COURT
 City FULLERTON State CA Zip Code 92831-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368251
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MILLER, RAYMOND, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3373 FLUFANNA TOWNLINE RD.
 City JAMESTOWN State NY Zip Code 14701-9011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359955
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. MILLER, RAYMOND, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3373 FLUFANNA TOWNLINE RD.
 City JAMESTOWN State NY Zip Code 14701-9011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368792
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	182.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3286 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, RAYMOND, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3373 FLUFANNA TOWNLINE RD.
 City JAMESTOWN State NY Zip Code 14701-9011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372562
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MILLER, RAYMOND, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3373 FLUFANNA TOWNLINE RD.
 City JAMESTOWN State NY Zip Code 14701-9011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384822
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. MILLER, RAYMOND, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3373 FLUFANNA TOWNLINE RD.
 City JAMESTOWN State NY Zip Code 14701-9011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419561
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	164.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3287 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, VAIL, K., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3840 STONEBRIDGE RD

City DAYTON	State OH	Zip Code 45419-1134
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEIDELBERG DISTRIBUTING CO	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.347221

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MILLER, WILLIAM, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 445 VISTA DEL CAMP

City CAMARILLO	State CA	Zip Code 93010-8477
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISI	Occupation (for Individual) EXEC
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.361047

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. MILLGARD, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 485 JAGUAR RAOD

City GOODMAN	State MO	Zip Code 64843-9193
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410633

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3288 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLS, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2650 S HANLEY ROAD, SUITE 200

City SAINT LOUIS	State MO	Zip Code 63144-2559
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MILLS PROPERTIES	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.348165

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MILLS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 W. TAYLOR P.O. BOX 218

City LADOGA	State IN	Zip Code 47954-0218
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.352780

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MILLS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 300 W. TAYLOR P.O. BOX 218

City LADOGA	State IN	Zip Code 47954-0218
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384390

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3289 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 W. TAYLOR P.O. BOX 218

City LADOGA	State IN	Zip Code 47954-0218
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384406

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MILLS, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 W. TAYLOR P.O. BOX 218

City LADOGA	State IN	Zip Code 47954-0218
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403570

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MILLS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20895 JO MARIE WAY

City CALLAWAY	State MD	Zip Code 20620-2307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOD	Occupation (for Individual) CIVILIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2016

Transaction ID : SA11A.354621

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3290 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20895 JO MARIE WAY

City CALLAWAY	State MD	Zip Code 20620-2307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOD	Occupation (for Individual) CIVILIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359228

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MILLS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20895 JO MARIE WAY

City CALLAWAY	State MD	Zip Code 20620-2307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOD	Occupation (for Individual) CIVILIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.387059

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MILLS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20895 JO MARIE WAY

City CALLAWAY	State MD	Zip Code 20620-2307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOD	Occupation (for Individual) CIVILIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422836

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3291 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILOS, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1836 SOUTH WABASH AVE

City CHICAGO	State IL	Zip Code 60616-1615
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2016

Transaction ID : SA11A.353170

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MILOS, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1836 SOUTH WABASH AVE

City CHICAGO	State IL	Zip Code 60616-1615
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.370018

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MILOS, TED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1836 SOUTH WABASH AVE

City CHICAGO	State IL	Zip Code 60616-1615
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403833

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3292 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILTON, HAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2430 WILDBROOK RUN

City BLOOMFIELD HILLS	State MI	Zip Code 48304-1444
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391269

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

B. MILTON, HAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2430 WILDBROOK RUN

City BLOOMFIELD HILLS	State MI	Zip Code 48304-1444
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391271

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MILTON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1517 ANACOSTIA AVE.

City MOUNT PLEASANT	State SC	Zip Code 29466-7510
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352467

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 3293 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 ANACOSTIA AVE.
 City MOUNT PLEASANT State SC Zip Code 29466-7510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357466
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MILTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 ANACOSTIA AVE.
 City MOUNT PLEASANT State SC Zip Code 29466-7510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382799
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MILTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 ANACOSTIA AVE.
 City MOUNT PLEASANT State SC Zip Code 29466-7510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405872
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3294 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILTON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1517 ANACOSTIA AVE.
City MOUNT PLEASANT State SC Zip Code 29466-7510
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413027
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MILTON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1517 ANACOSTIA AVE.
City MOUNT PLEASANT State SC Zip Code 29466-7510
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413175
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MINCKS, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 119001 CRESCENT SPRINGS
City KINGWOOD State TX Zip Code 77339-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INSPERITY Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 4250.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364121
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3295 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINCKS, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119001 CRESCENT SPRINGS
 City KINGWOOD State TX Zip Code 77339-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSPERITY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379045
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MINCKS, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119001 CRESCENT SPRINGS
 City KINGWOOD State TX Zip Code 77339-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSPERITY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390606
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MINCKS, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119001 CRESCENT SPRINGS
 City KINGWOOD State TX Zip Code 77339-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INSPERITY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402586
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3296 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINERVA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 WILLARD AVE
 City SLEEPY HOLLOW State NY Zip Code 10591-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EM PRESS AMBULANCE SERVICE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421205
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MINGE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16637 WATERFORD POINTE CIRCLE
 City ANCHORAGE State AK Zip Code 99516-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BP AMERICA Occupation (for Individual) CHAIRMAN AND PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370135
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

C. MINJARES, ALONZO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13500 N RANCHO VISTOSO BOULEVARD APT 303
 City ORO VALLEY State AZ Zip Code 85755-5961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363571
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3297 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINKOFF, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 ROWE RD

City GREAT BARRINGTON	State MA	Zip Code 01230-8902
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RARE BOOK DEALER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409420

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MINNICK, M DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 MADRONE AVENUE

City KENTFIELD	State CA	Zip Code 94904-1080
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PILLSBURY WINTHROP SHAW PITTMAN, LLP	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.378140

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MINORE, LAURA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2616 SPRING CREEK ROAD

City ROCKFORD	State IL	Zip Code 61107-1066
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKFORD ANESTHESIOLOGIST	Occupation (for Individual) NURSE ANESTHETIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379391

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3298 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINTUN, JAMES, H., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 FOX RUN LANE
APT 626

City ORCHARD PARK State NY Zip Code 14127-3173

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389820

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

B. MIOLA, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11134 E. SAGUARO CANYON TRL

City SCOTTSDALE State AZ Zip Code 85255-7149

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE BUSINESS/RANCHER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369109

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. MIRA, JOAQUIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22626 E RANGE

City SAN ANTONIO State TX Zip Code 78255-2135

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349250

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3299 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374721
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383900
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384552
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3300 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399650
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402224
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402233
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3301 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402235
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MIRA, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22626 E RANGE
 City SAN ANTONIO State TX Zip Code 78255-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420431
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MIRACLE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17719 GRANT RD.
 City CYPRESS State TX Zip Code 77429-7122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405036
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3302 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRACLE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17719 GRANT RD.
 City CYPRESS State TX Zip Code 77429-7122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415272
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MIRACLE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17719 GRANT RD.
 City CYPRESS State TX Zip Code 77429-7122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415273
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MIRELES, ANTONIO, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20607 HIGHLAND LAKE LOOP
 City LAGO VISTA State TX Zip Code 78645-7501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAM CHALLENGER ENTERPRISES, LLC Occupation (for Individual) INVESTOR / ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352650
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3303 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRELES, ANTONIO, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP

City LAGO VISTA	State TX	Zip Code 78645-7501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AAM CHALLENGER ENTERPRISES, LLC	Occupation (for Individual) INVESTOR / ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.00

Date of Receipt
08 / 20 / 2016
Transaction ID : SA11A.376120

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MIRELES, ANTONIO, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP

City LAGO VISTA	State TX	Zip Code 78645-7501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AAM CHALLENGER ENTERPRISES, LLC	Occupation (for Individual) INVESTOR / ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.00

Date of Receipt
08 / 23 / 2016
Transaction ID : SA11A.376516

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MIRELES, ANTONIO, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP

City LAGO VISTA	State TX	Zip Code 78645-7501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AAM CHALLENGER ENTERPRISES, LLC	Occupation (for Individual) INVESTOR / ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
293.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11A.400858

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3304 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRELES, ANTONIO, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20607 HIGHLAND LAKE LOOP
 City LAGO VISTA State TX Zip Code 78645-7501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAM CHALLENGER ENTERPRISES, LLC Occupation (for Individual) INVESTOR / ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411639
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. MIRELES, ANTONIO, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20607 HIGHLAND LAKE LOOP
 City LAGO VISTA State TX Zip Code 78645-7501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAM CHALLENGER ENTERPRISES, LLC Occupation (for Individual) INVESTOR / ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411646
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. MIRELES, ANTONIO, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20607 HIGHLAND LAKE LOOP
 City LAGO VISTA State TX Zip Code 78645-7501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAM CHALLENGER ENTERPRISES, LLC Occupation (for Individual) INVESTOR / ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411648
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 118.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3305 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MIRSKY, CYNTHIA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25331 DERBYHILL DRIVE
 City LAGUNA HILLS State CA Zip Code 92653-7836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC RIM CAPITAL INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357874
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MITCHELL, BARBARA, I., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5577 BRIDGEPORT CIRCLE
 City LIVERMORE State CA Zip Code 94551-5601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376025
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MITCHELL, BARBARA, I., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5577 BRIDGEPORT CIRCLE
 City LIVERMORE State CA Zip Code 94551-5601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380671
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3306 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITCHELL, BARBARA, I., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5577 BRIDGEPORT CIRCLE

City LIVERMORE	State CA	Zip Code 94551-5601
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390435

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MITCHELL, CLARENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POST OFFICE BOX 1008

City PROSPECT	State KY	Zip Code 40059-1008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MITCHCO INTERNATIONAL	Occupation (for Individual) CHAIRMAN AND CEO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412725

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. MITCHELL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4043 GRANDVIEW DR.

City DUNNSVILLE	State VA	Zip Code 22454-2082
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NOT EMPLOYED	Occupation (for Individual) NOT EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Transaction ID : SA11A.360133

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3307 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITCHELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4043 GRANDVIEW DR.
 City DUNNSVILLE State VA Zip Code 22454-2082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360134
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MITCHELL, SUZAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30130 AVENIDA TRANQUILA
 City RANCHO PALOS VERDE State CA Zip Code 90275-4517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404143
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MITCHELL, SUZAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30130 AVENIDA TRANQUILA
 City RANCHO PALOS VERDE State CA Zip Code 90275-4517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404144
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3308 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITCHELL, SUZAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30130 AVENIDA TRANQUILA
 City RANCHO PALOS VERDE State CA Zip Code 90275-4517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415182
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MITCHELL, SUZAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30130 AVENIDA TRANQUILA
 City RANCHO PALOS VERDE State CA Zip Code 90275-4517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415184
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MITRAKAS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 EAST MAINST
 City MARLBOROUGH State MA Zip Code 01752-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348363
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3309 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITRAKAS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 EAST MAINST
 City MARLBOROUGH State MA Zip Code 01752-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381744
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MITRAKAS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 EAST MAINST
 City MARLBOROUGH State MA Zip Code 01752-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381761
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MITRAKAS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 EAST MAINST
 City MARLBOROUGH State MA Zip Code 01752-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381762
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3310 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITRAKAS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 297 EAST MAINST
 City MARLBOROUGH State MA Zip Code 01752-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416081
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MITTELMAN, LOUIS, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 608
 City GORDONSVILLE State VA Zip Code 22942-0608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396434
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MIZEL, LARRY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4350 S MONACO STREET FLOOR 5
 City DENVER State CO Zip Code 80237-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M.D.C. HOLDINGS INC Occupation (for Individual) CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.361540
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3311 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 W. VALLEY BLVD.
 City ALHAMBRA State CA Zip Code 91803-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.414066
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 W. VALLEY BLVD.
 City ALHAMBRA State CA Zip Code 91803-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.414070
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 W. VALLEY BLVD.
 City ALHAMBRA State CA Zip Code 91803-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.414087
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3312 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MO, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 W. VALLEY BLVD.
 City ALHAMBRA State CA Zip Code 91803-1926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOBLEY, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 CENTER DR
 City HIGHLANDS State NC Zip Code 28741-8392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420241
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MOCKENSTURM, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7913 LOOKOUT CIRCLE
 City MONCLOVA State OH Zip Code 43542-8314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353634
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3313 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOCKENSTURM, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7913 LOOKOUT CIRCLE

City MONCLOVA	State OH	Zip Code 43542-8314
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382123

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MOCKENSTURM, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7913 LOOKOUT CIRCLE

City MONCLOVA	State OH	Zip Code 43542-8314
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383958

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MOCKENSTURM, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7913 LOOKOUT CIRCLE

City MONCLOVA	State OH	Zip Code 43542-8314
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397660

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3314 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOCKENSTURM, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7913 LOOKOUT CIRCLE
 City MONCLOVA State OH Zip Code 43542-8314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407720
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOE, VERNETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W4181 CERESA DRIVE
 City WEST SALEM State WI Zip Code 54669-9555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385961
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOE, VERNETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W4181 CERESA DRIVE
 City WEST SALEM State WI Zip Code 54669-9555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403914
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3315 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOE, VERNETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W4181 CERESA DRIVE
 City WEST SALEM State WI Zip Code 54669-9555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403949
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOEHRKE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10312 N. VERSAILLES CT.
 City MEQUON State WI Zip Code 53092-5231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368558
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MOEHRKE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10312 N. VERSAILLES CT.
 City MEQUON State WI Zip Code 53092-5231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402817
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3316 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOFFETT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 NORTHRIM LN
 City COLORADO SPRINGS State CO Zip Code 80919-3401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 26 / 2016
Transaction ID : SA11A.355321
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

B. MOFFETT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 NORTHRIM LN
 City COLORADO SPRINGS State CO Zip Code 80919-3401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 30 / 2016
Transaction ID : SA11A.423074
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

C. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 07 / 18 / 2016
Transaction ID : SA11A.348445
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3317 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT
 N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381960
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT
 N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT
 N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394282
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3318 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT
 N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412684
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT
 N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418648
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOFFET, LAVANDA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6520 LA POZA COURT
 N/A
 City CITRUS HEIGHTS State CA Zip Code 95621-4363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418651
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3319 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOFFITT, CHARLES, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4405 CORONADO AVENUE

City BAKERSFIELD	State CA	Zip Code 93306-1730
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
08 / 02 / 2016
Transaction ID : SA11A.360068

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. MOFFITT, CHARLES, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4405 CORONADO AVENUE

City BAKERSFIELD	State CA	Zip Code 93306-1730
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.417064

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MOGERMAN, SALLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 62 MOORINGS DRIVE

City LAKE SAINT LOUIS	State MO	Zip Code 63367-2072
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
07 / 16 / 2016
Transaction ID : SA11A.349075

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3320 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOGERMAN, SALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 MOORINGS DRIVE
 City LAKE SAINT LOUIS State MO Zip Code 63367-2072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369076
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOGERMAN, SALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 MOORINGS DRIVE
 City LAKE SAINT LOUIS State MO Zip Code 63367-2072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398673
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOHANTY, SANTOSH, K., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8672 DOLPHIN DR.
 City HUNTINGTON BEACH State CA Zip Code 92646-3238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361206
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3321 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MOHANTY, SANTOSH, K., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8672 DOLPHIN DR.

City HUNTINGTON BEACH	State CA	Zip Code 92646-3238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388190

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. MOHANTY, SANTOSH, K., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8672 DOLPHIN DR.

City HUNTINGTON BEACH	State CA	Zip Code 92646-3238
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413604

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. MOHOLLAND , BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2358 RIVERSIDE AVE.
102

City JACKSONVILLE	State FL	Zip Code 32204-4610
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOE MOHOLLAND INC.	Occupation (for Individual) CO-OWNER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413486

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3322 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOIDEEN, AHAMED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8780, GHIA STREET, NE,
 City BLAINE State MN Zip Code 55014-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349366
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOIDEEN, AHAMED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8780, GHIA STREET, NE,
 City BLAINE State MN Zip Code 55014-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.369190
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MOIDEEN, AHAMED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8780, GHIA STREET, NE,
 City BLAINE State MN Zip Code 55014-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 18 / 2016**
Transaction ID : SA11A.401007
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3323 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357499
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366913
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370173
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3324 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380354
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380355
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382744
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3325 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394558
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403320
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407665
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3326 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407670
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408632
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408633
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3327 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413086
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MONIN, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39047 GRIFFIN LANDING
 City LADY LAKE State FL Zip Code 32159-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415852
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONKE, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25392 COUNTY ROAD 18
 City NICKERSON State NE Zip Code 68044-2531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AGRICULTURE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352327
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3328 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONKE, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25392 COUNTY ROAD 18
 City NICKERSON State NE Zip Code 68044-2531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AGRICULTURE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375862
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MONKE, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25392 COUNTY ROAD 18
 City NICKERSON State NE Zip Code 68044-2531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AGRICULTURE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387364
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MONKE, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25392 COUNTY ROAD 18
 City NICKERSON State NE Zip Code 68044-2531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AGRICULTURE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401460
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3329 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358680
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389772
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. MONKMAN, WILLIAM, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 CARILLON POINT
 City KIRKLAND State WA Zip Code 98033-7412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES ENTERPRISES LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404426
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3330 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONNIN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 INVERNESS DR.
 City DEFIANCE State OH Zip Code 43512-8549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359217
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MONNIN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 INVERNESS DR.
 City DEFIANCE State OH Zip Code 43512-8549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.362947
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MONNIN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 INVERNESS DR.
 City DEFIANCE State OH Zip Code 43512-8549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403703
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3331 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349932
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349978
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359301
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3332 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.360000
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376185
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381992
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3333 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386313
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.392040
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 09 / 20 / 2016
Transaction ID : SA11A.400847
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3334 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403029
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410039
 Amount of Each Receipt this Period
 15.00
 Memo Item
 CONTRIBUTION

C. MONTERO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 SOUTH DUNAS STREET
 NONE
 City ORANGE State CA Zip Code 92869-3821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410129
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3335 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTGOMERY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23961 LYNNEWOOD DR
 City ST MICHAELS State MD Zip Code 21663-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388526
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MONTGOMERY, LEONORA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 DEL MONTE DRIVE
 City HOUSTON State TX Zip Code 77019-3519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379690
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. MONTGOMERY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2689 W. SAN BRUNO
 City FRESNO State CA Zip Code 93711-2723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.384995
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3336 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MONTGOMERY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2689 W. SAN BRUNO

City FRESNO	State CA	Zip Code 93711-2723
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2016

Transaction ID : SA11A.386638

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MONTGOMERY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2689 W. SAN BRUNO

City FRESNO	State CA	Zip Code 93711-2723
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2016

Transaction ID : SA11A.386639

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MONTGOMERY, ROBERT, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3201 ROSSMOOR PARKWAY
APT 2

City WALNUT CREEK	State CA	Zip Code 94595-3844
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) HOSPITAL MANAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2016

Transaction ID : SA11A.365243

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3337 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOODY, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 COLONY PARK DRIVE
 City GALVESTON State TX Zip Code 77551-1739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389516
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MOODY III, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 W. ALABAMA
 City HOSUTON State TX Zip Code 77098-2001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOODY RAMBIN Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.401010
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MOODY, DAN, M., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 W ALABAMA STREET
 City HOUSTON State TX Zip Code 77098-2001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOODY RAMBIN Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372514
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3338 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOODY, DONNA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ROBINHOOD DR
 City MOUNTAIN LAKES State NJ Zip Code 07046-1461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348635
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOODY, DONNA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ROBINHOOD DR
 City MOUNTAIN LAKES State NJ Zip Code 07046-1461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368287
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MOODY, DONNA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ROBINHOOD DR
 City MOUNTAIN LAKES State NJ Zip Code 07046-1461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368288
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3339 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOODY, DONNA, L.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ROBINHOOD DR
 City MOUNTAIN LAKES State NJ Zip Code 07046-1461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402482
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MOODY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2309 BIRKDALE LANE
 City KERRVILLE State TX Zip Code 78028-6422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370528
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MOODY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2309 BIRKDALE LANE
 City KERRVILLE State TX Zip Code 78028-6422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410790
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3340 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOODY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2309 BIRKDALE LANE

City KERRVILLE	State TX	Zip Code 78028-6422
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410792

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MOON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5995 MOUNT GAINOR

City WIMBERLEY	State TX	Zip Code 78676-4278
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MERRILL LYNCH	Occupation (for Individual) BANKER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410063

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. MOON, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1831

City CARMEL	State CA	Zip Code 93921-1831
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.348033

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3341 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, CRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2410 INWOOD
 City HOUSTON State TX Zip Code 77019-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERRILL LYNCH Occupation (for Individual) WEALTH MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.348042
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. MOORE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 ONTARIO DRIVE
 City GREENVILLE State NC Zip Code 27858-6242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECU Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378296
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MOORE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 ONTARIO DRIVE
 City GREENVILLE State NC Zip Code 27858-6242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECU Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.393883
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3342 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, DONNA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 SW 130TH AVENUE

City BEAVERTON	State OR	Zip Code 97008-5116
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.347940

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. MOORE, DONNA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 SW 130TH AVENUE

City BEAVERTON	State OR	Zip Code 97008-5116
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364352

Amount of Each Receipt this Period
125.00

Memo Item CONTRIBUTION

C. MOORE, DONNA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 SW 130TH AVENUE

City BEAVERTON	State OR	Zip Code 97008-5116
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.396147

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3343 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, DONNA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 SW 130TH AVENUE
 City BEAVERTON State OR Zip Code 97008-5116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409619
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. MOORE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12931 BRIGHTON AVENUE
 City CARMEL State IN Zip Code 46032-9666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN INDIANA INC. Occupation (for Individual) PHYSICAL CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388966
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MOORE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CENTRAL STREET
 City WINCHESTER State MA Zip Code 01890-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K SQUARE LAW Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405961
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3344 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CENTRAL STREET
 City WINCHESTER State MA Zip Code 01890-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K SQUARE LAW Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405963
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MOORE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CENTRAL STREET
 City WINCHESTER State MA Zip Code 01890-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K SQUARE LAW Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405965
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MOORE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CENTRAL STREET
 City WINCHESTER State MA Zip Code 01890-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K SQUARE LAW Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410265
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3345 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1437 CENTRAL AVE APT 1107

City MEMPHIS	State TN	Zip Code 38104-4833
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEDICAL TRANSCRIPTION	Occupation (for Individual) ST. JUDE CRH
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : SA11A.364167

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. MOORE, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1437 CENTRAL AVE APT 1107

City MEMPHIS	State TN	Zip Code 38104-4833
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEDICAL TRANSCRIPTION	Occupation (for Individual) ST. JUDE CRH
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016

Transaction ID : SA11A.411084

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MOORE, HAROLD, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 WHITNEY PARK DRIVE

City NOLENSVILLE	State TN	Zip Code 37135-1530
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016

Transaction ID : SA11A.392458

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3346 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOORE, J P, , , JR		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 400 WILLIAMSON ROAD		Transaction ID : SA11A.414682
City GLADWYNE	State PA	Zip Code 19035-1607
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MOORE, JANET, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016
Mailing Address 6020 S RACE COURT		Transaction ID : SA11A.414590
City CENTENNIAL	State CO	Zip Code 80121-2870
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MOORE, LEN, , ,		Date of Receipt MM / DD / YYYY 07 / 20 / 2016
Mailing Address 16650 SCHOENBORN ST.		Transaction ID : SA11A.349852
City NORTH HILLS	State CA	Zip Code 91343-6106
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer (for Individual) MOORE INDUSTRIES	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3347 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, LEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16650 SCHOENBORN ST.

City NORTH HILLS	State CA	Zip Code 91343-6106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE INDUSTRIES	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2016

Transaction ID : SA11A.376181

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MOORE, LEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16650 SCHOENBORN ST.

City NORTH HILLS	State CA	Zip Code 91343-6106
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOORE INDUSTRIES	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400884

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MOORE, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1856 LAUREL CANYON BLVD

City LOS ANGELES	State CA	Zip Code 90046-2029
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ORACLE	Occupation (for Individual) PARTNER ENABLEMENT MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359780

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3348 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOORE, LINDA, , ,			Date of Receipt MM / DD / YYYY 09 / 13 / 2016
Mailing Address 1856 LAUREL CANYON BLVD			Transaction ID : SA11A.394268
City LOS ANGELES	State CA	Zip Code 90046-2029	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ORACLE		Occupation (for Individual) PARTNER ENABLEMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MOORE, LINDA, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 1856 LAUREL CANYON BLVD			Transaction ID : SA11A.403712
City LOS ANGELES	State CA	Zip Code 90046-2029	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ORACLE		Occupation (for Individual) PARTNER ENABLEMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MOORE, LINDA, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 1856 LAUREL CANYON BLVD			Transaction ID : SA11A.403727
City LOS ANGELES	State CA	Zip Code 90046-2029	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ORACLE		Occupation (for Individual) PARTNER ENABLEMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3349 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MOORE, ROSELEEM, , ,

Mailing Address 5140 KACHEMAK DR

City HOMER State AK Zip Code 99603-9478

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMMERCIAL FISHING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11A.386300

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MOORE, ROSELEEM, , ,

Mailing Address 5140 KACHEMAK DR

City HOMER State AK Zip Code 99603-9478

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMMERCIAL FISHING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11A.386303

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MOORE, ROSELEEM, , ,

Mailing Address 5140 KACHEMAK DR

City HOMER State AK Zip Code 99603-9478

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMMERCIAL FISHING

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016

Transaction ID : SA11A.392046

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3350 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, ROSELEEM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5140 KACHEMAK DR
 City HOMER State AK Zip Code 99603-9478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMMERCIAL FISHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392047
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOORE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 GLENBROOK COURT
 City ATLANTIS State FL Zip Code 33462-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEVE MOORE CHEVROLET Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396967
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MOORE, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14039 BLACKCASTLE CT.
 City KING GEORGE State VA Zip Code 22485-5570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWHEAD SCIENCE & TECHNOLOGY LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348607
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3351 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14039 BLACKCASTLE CT.
 City KING GEORGE State VA Zip Code 22485-5570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWHEAD SCIENCE & TECHNOLOGY LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381982
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOORE, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14039 BLACKCASTLE CT.
 City KING GEORGE State VA Zip Code 22485-5570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWHEAD SCIENCE & TECHNOLOGY LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403707
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOORE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1748 VESTWOOD HILLS DRIVE
 City VESTAVIA State AL Zip Code 35216-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ALABAMA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348786
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3352 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1748 VESTWOOD HILLS DRIVE
 City VESTAVIA State AL Zip Code 35216-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ALABAMA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365050
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MOORE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1748 VESTWOOD HILLS DRIVE
 City VESTAVIA State AL Zip Code 35216-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ALABAMA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403189
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOORE, YVONNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 BRIDGE ROAD
 City HILLSBOROUGH State CA Zip Code 94010-6910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.406914
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3353 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOORMAN, RUTH, , ,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016
Mailing Address 200 BEACON STREET UNIT 4		Transaction ID : SA11A.388761
City BOSTON	State MA	Zip Code 02116-1332
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MOORWOOD, CHARLES, , ,		Date of Receipt MM / DD / YYYY 08 / 18 / 2016
Mailing Address 1041 LANARK CT		Transaction ID : SA11A.375087
City SUNNYVALE	State CA	Zip Code 94087-5047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) ERICSSON	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MOORWOOD, CHARLES, , ,		Date of Receipt MM / DD / YYYY 08 / 18 / 2016
Mailing Address 1041 LANARK CT		Transaction ID : SA11A.375088
City SUNNYVALE	State CA	Zip Code 94087-5047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) ERICSSON	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3354 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 LANARK CT
 City SUNNYVALE State CA Zip Code 94087-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERICSSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387239
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MOORWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 LANARK CT
 City SUNNYVALE State CA Zip Code 94087-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERICSSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387240
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MOORWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 LANARK CT
 City SUNNYVALE State CA Zip Code 94087-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERICSSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405619
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3355 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOORWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 LANARK CT
 City SUNNYVALE State CA Zip Code 94087-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERICSSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405620
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MOORWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 LANARK CT
 City SUNNYVALE State CA Zip Code 94087-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERICSSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417676
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MOORWOOD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 LANARK CT
 City SUNNYVALE State CA Zip Code 94087-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERICSSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417677
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3356 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORCOTT, SOUTHWOOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6010 SE MORNING DOVE WAY
 City HOBE SOUND State FL Zip Code 33455-8022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.374062
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MORETON, EDWARD, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1810 COUNTRYSIDE DRIVE
 City SALT LAKE CITY State UT Zip Code 84106-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392463
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MORGAN, DAVID, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 STUART LANE
 City BRENTWOOD State TN Zip Code 37027-5823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LATTIMORE, BLACK, MORGAN, CAIN Occupation (for Individual) TAX PREPARER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392832
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3357 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, HARVEY, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 88

City SALUDA	State VA	Zip Code 23149-0088
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016
Transaction ID : SA11A.360926

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. MORGAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18611 141ST AVE NE

City WOODINVILLE	State WA	Zip Code 98072-6828
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MORFAB		Occupation (for Individual) MNGR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2016
Transaction ID : SA11A.353354

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MORGAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 21005 WOODS CREEK ROAD

City MONROE	State WA	Zip Code 98272-9691
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2016
Transaction ID : SA11A.353904

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3358 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1957 SW MONTGOMERY DR
 City PORTLAND State OR Zip Code 97201-2440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMBIA HEALTH SOLUTIONS Occupation (for Individual) BOARD MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381556
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. MORGAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21005 WOODS CREEK ROAD
 City MONROE State WA Zip Code 98272-9691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392663
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MORGAN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6047 WOODFERN DR
 City RANCHO PALOS VERDE State CA Zip Code 90275-2263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376040
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3359 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6047 WOODFERN DR
 City RANCHO PALOS VERDE State CA Zip Code 90275-2263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410615
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MORGAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1016 TOMPKINS DRIVE
 City PORT ORANGE State FL Zip Code 32129-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405994
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MORGAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1016 TOMPKINS DRIVE
 City PORT ORANGE State FL Zip Code 32129-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422495
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3360 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, SALLY, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 PALMER TERRACE

City RIVERSIDE	State CT	Zip Code 06878-2103
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348923

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MORGAN, SALLY, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 PALMER TERRACE

City RIVERSIDE	State CT	Zip Code 06878-2103
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402240

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MORGAN, SALLY, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 PALMER TERRACE

City RIVERSIDE	State CT	Zip Code 06878-2103
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420438

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3361 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, SALLY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 PALMER TERRACE
 City RIVERSIDE State CT Zip Code 06878-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420441
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MORGAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 WOODCUTT PLACE
 City MARIETTA State GA Zip Code 30062-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LANDSCAPE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353420
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORGAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 WOODCUTT PLACE
 City MARIETTA State GA Zip Code 30062-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LANDSCAPE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368977
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3362 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 WOODCUTT PLACE
 City MARIETTA State GA Zip Code 30062-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LANDSCAPE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384162
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORGAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 WOODCUTT PLACE
 City MARIETTA State GA Zip Code 30062-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LANDSCAPE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384172
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MORGAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 WOODCUTT PLACE
 City MARIETTA State GA Zip Code 30062-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LANDSCAPE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405073
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3363 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGAN, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1387 WOODCUTT PLACE

City MARIETTA	State GA	Zip Code 30062-2164
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LANDSCAPE ARCHITECT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405077

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MORGENS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3562 KNOLLWOOD DRIVE NW

City ATLANTA	State GA	Zip Code 30305-1022
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.380954

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. MORLEY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 NICKLAUS LANE

City KIAWAH ISLAND	State SC	Zip Code 29455-5798
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390341

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3364 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORLEY, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7575 PELICAN BAY BLVD.
 UNIT 401
 City NAPLES State FL Zip Code 34108-5533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349381
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MORLEY, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7575 PELICAN BAY BLVD.
 UNIT 401
 City NAPLES State FL Zip Code 34108-5533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409234
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MORRA, TRACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 595 INLET DR
 City MARCO ISLAND State FL Zip Code 34145-5991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.387480
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3365 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WATROUS POINT ROAD
 City OLD SAYBROOK State CT Zip Code 06475-1359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347379
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. MORRIS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WATROUS POINT ROAD
 City OLD SAYBROOK State CT Zip Code 06475-1359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347382
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORRIS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WATROUS POINT ROAD
 City OLD SAYBROOK State CT Zip Code 06475-1359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348476
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3366 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WATROUS POINT ROAD
 City OLD SAYBROOK State CT Zip Code 06475-1359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372703
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MORRIS, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WATROUS POINT ROAD
 City OLD SAYBROOK State CT Zip Code 06475-1359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399929
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORRISON, ARTHUR, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12802 TAYLOR STREET
 City GARDEN GROVE State CA Zip Code 92845-2837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360934
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3367 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, ARTHUR, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12802 TAYLOR STREET

City GARDEN GROVE	State CA	Zip Code 92845-2837
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2016

Transaction ID : SA11A.376068

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. MORRISON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 52 RIDGEVIEW AVENUE

City GREENWICH	State CT	Zip Code 06830-4749
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LRP MANAGEMENT NY CORP	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413376

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MORRIS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4011 FARRALON WAY

City OXNARD	State CA	Zip Code 93035-1430
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349364

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3368 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370194
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MORRIS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4011 FARRALON WAY
 City OXNARD State CA Zip Code 93035-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387957
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400205
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3369 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403533
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403548
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403616
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3370 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1454 WILDERNESS RIDGE TRAIL
 City CROWNSVILLE State MD Zip Code 21032-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403619
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORRILL, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 332 MORNINGSIDE DRIVE
 City SAN ANTONIO State TX Zip Code 78209-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354111
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MORRIS, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520N. TELEGRAPH
 City DEARBORN State MI Zip Code 48128-1658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H.G. MORRIS D.D.S. Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352471
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3371 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520N. TELEGRAPH

City DEARBORN	State MI	Zip Code 48128-1658
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) H.G. MORRIS D.D.S.	Occupation (for Individual) DENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.377490

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MORRIS, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520N. TELEGRAPH

City DEARBORN	State MI	Zip Code 48128-1658
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) H.G. MORRIS D.D.S.	Occupation (for Individual) DENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401523

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MORRIS, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520N. TELEGRAPH

City DEARBORN	State MI	Zip Code 48128-1658
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) H.G. MORRIS D.D.S.	Occupation (for Individual) DENTIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407423

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3372 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520N. TELEGRAPH
 City DEARBORN State MI Zip Code 48128-1658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H.G. MORRIS D.D.S. Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410699
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348420
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348423
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3373 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371466
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374381
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391280
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3374 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391283
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410733
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MORRISON, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 OLAR COURT
 City THE VILLAGES State FL Zip Code 32162-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411825
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3375 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 W 96TH STREET
 City LEAWOOD State KS Zip Code 66206-1912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417443
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MORRIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 15127
 City HOUSTON State TX Zip Code 77220-5127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALO Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383365
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MORRISON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 GOLFOVIEW DRIVE
 City JACKSON State AL Zip Code 36545-3207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403881
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3376 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 GOLFVIEW DRIVE
 City JACKSON State AL Zip Code 36545-3207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403888
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MORRIS, ROSE, MARIE, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4115 CLOVERNOOK LN
 City SEABROOK State TX Zip Code 77586-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354911
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MORRIS, ROSE, MARIE, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4115 CLOVERNOOK LN
 City SEABROOK State TX Zip Code 77586-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376642
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3377 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, ROSE, MARIE, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4115 CLOVERNOOK LN

City SEABROOK	State TX	Zip Code 77586-4202
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381159

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. MORRIS, ROSE, MARIE, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4115 CLOVERNOOK LN

City SEABROOK	State TX	Zip Code 77586-4202
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394819

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. MORRIS, SCOTT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1411 EAST MISSION AVE

City SPOKANE	State WA	Zip Code 99220-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVISTA CORP	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367905

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3378 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 SIMARA STREET
 City STUART State FL Zip Code 34996-6326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364366
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MORRISON, WILLIAM, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 E FAIRMONT AVE
 City NEW CASTLE State PA Zip Code 16105-2145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.346282
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MORRISON, WILLIAM, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 E FAIRMONT AVE
 City NEW CASTLE State PA Zip Code 16105-2145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381176
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3379 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRISON, WILLIAM, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 137 E FAIRMONT AVE

City NEW CASTLE	State PA	Zip Code 16105-2145
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387668

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. MORROW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 542 SADDLE LANE

City GROSSE POINTE WOOD	State MI	Zip Code 48236-2729
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.373000

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MORROW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 542 SADDLE LANE

City GROSSE POINTE WOOD	State MI	Zip Code 48236-2729
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400158

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3380 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORROW, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 542 SADDLE LANE
 City GROSSE POINTE WOOD State MI Zip Code 48236-2729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418234
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352417
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358166
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3381 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375940
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394067
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401506
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3382 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORSE, DOROTHY, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 254671
 City SACRAMENTO State CA Zip Code 95865-4671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412614
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORSE, M'LISSA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 LAKE SUMTER LANDING
 City THE VILLAGES State FL Zip Code 32162-2699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385229
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. MORSE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 LAKE SUMTER LANDING
 City THE VILLAGES State FL Zip Code 32162-2699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE VILLAGES OF LAKE SUMTER INC Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385228
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3383 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MORSE, RICHARD, , ,

Mailing Address **5378 GENEVA TER**

City **COLFAX** State **NC** Zip Code **27235-9600**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394751

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MORTENSON, WILLIAM, S., MR.,

Mailing Address **559 ALMOLOYA DRIVE**

City **PACIFIC PALISADES** State **CA** Zip Code **90272-4426**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358705

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MORTENSON, WILLIAM, S., MR.,

Mailing Address **559 ALMOLOYA DRIVE**

City **PACIFIC PALISADES** State **CA** Zip Code **90272-4426**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.367175

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **1700.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3384 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORTON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 SHADESCREEK PARKWAY
 City BIRMINGHAM State AL Zip Code 35209-4454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBINS & MORTON Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404284
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. MORTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 ROGERS AVE
 City FORT SMITH State AR Zip Code 72901-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTRAL ARKANSAS NURSING CENTERS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381561
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

C. MORTON, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 NEBRASKA STREET
 City NEMAHA State NE Zip Code 68414-6051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORMAN MORTON Occupation (for Individual) TECHNICIAN IRI INC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358300
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 16050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3385 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORTON, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 NEBRASKA STREET
 City NEMAHA State NE Zip Code 68414-6051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORMAN MORTON Occupation (for Individual) TECHNICIAN IRI INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382449
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MORTON, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 NEBRASKA STREET
 City NEMAHA State NE Zip Code 68414-6051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORMAN MORTON Occupation (for Individual) TECHNICIAN IRI INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416112
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MORTON, YOLANDA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16262 PINEVIEW ROAD
 City SANTA CLARITA State CA Zip Code 91387-4052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORTON GRINDING CO. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369547
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3386 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSCHNER, ALBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1022 AYNSLEY AVE
 City LAKE FOREST State IL Zip Code 60045-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378666
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MOSCHNER, ALBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1022 AYNSLEY AVE
 City LAKE FOREST State IL Zip Code 60045-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394328
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MOSELEY, COLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 42ND AVE E APT 8
 City SEATTLE State WA Zip Code 98112-3855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIMPSON Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367885
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3387 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSELEY, FURMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 UNIVERSITY STREET
 SUITE 1200
 City SEATTLE State WA Zip Code 98101-2519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 29000.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.354428
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. MOSELEY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 UNIVERSITY STREET
 STE 1200
 City SEATTLE State WA Zip Code 98101-2519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366366
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

C. MOSER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 NORTHWOOD TER.
 City HAMILTON State OH Zip Code 45013-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372155
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 25650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3388 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 NORTHWOOD TER.
 City HAMILTON State OH Zip Code 45013-1422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399946
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. MOSIER, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3462 CORNICE PLACE
 City WOODBRIDGE State VA Zip Code 22192-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRFS INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396228
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. MOSS, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 942 FAIRWAY DRIVE
 City BAKERSFIELD State CA Zip Code 93309-2417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COLLECTION AGENCY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352638
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 W 1500 S
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT LNC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355639
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 W 1500 S
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT LNC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374527
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 W 1500 S
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT LNC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399566
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3390 OF 5722
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 W 1500 S
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT LNC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403641
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 W 1500 S
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT LNC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410849
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MOSS, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1462 W 1500 S
 City WOODS CROSS State UT Zip Code 84087-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOSS MANAGEMENT LNC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418996
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3391 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOSS, GEORGE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 E 52ND ST
 City NEW YORK State NY Zip Code 10022-6445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421202
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. MOSS, JOYCE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 E 52ND ST
 City NEW YORK State NY Zip Code 10022-6445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421201
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. MOTTE, BERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 SPARTINA POINT DRIVE
 City HILTON HEAD ISLAND State SC Zip Code 29926-1076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381342
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3392 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOUNTJOY, JAMES, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3035 ARBORCREEK LANE

City CINCINATI	State OH	Zip Code 45242-6358
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.378472

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MOUNTJOY, JAMES, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3035 ARBORCREEK LANE

City CINCINATI	State OH	Zip Code 45242-6358
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394831

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MOURAD, MAJIDA, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 PENNSYLVANIA AVENUE NW
SUITE 550

City WASHINGTON	State DC	Zip Code 20004-1024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHENIERE ENERGY INC	Occupation (for Individual) VP GOVERNMENT RELATIONS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.398466

Amount of Each Receipt this Period
7500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3393 OF 5722
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOURAD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 NANAK COURT
 City NAPERVILLE State IL Zip Code 60565-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369978
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MOURAD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 NANAK COURT
 City NAPERVILLE State IL Zip Code 60565-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385955
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MOYER, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29677 WATSON RD.
 City CAMBRIDGE SPRINGS State PA Zip Code 16403-4463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358349
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3394 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOYER, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29677 WATSON RD.
 City CAMBRIDGE SPRINGS State PA Zip Code 16403-4463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382487
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. MOYNAHAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 846 WINDSTONE BOULEVARD
 City BRENTWOOD State TN Zip Code 37027-6215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360074
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MOYNIHAN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2700 DEVONSHIRE COURT
 City GRAPEVINE State TX Zip Code 76051-6442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BNSF RAILWAY Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365176
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1575.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3395 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUCCINO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 HALSTEAD AVENUE
 City HARRISON State NY Zip Code 10528-3727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALON AND SPA MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412459
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

B. MUCCINO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 HALSTEAD AVENUE
 City HARRISON State NY Zip Code 10528-3727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALON AND SPA MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412460
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

C. MUCH, MORRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 N WACKER DRIVE SUITE 1800
 City CHICAGO State IL Zip Code 60606-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUCH SHELIST Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360903
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 440.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3396 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUCH, MORRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 N WACKER DRIVE
 SUITE 1800
 City CHICAGO State IL Zip Code 60606-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUCH SHELIST Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381224
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362174
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368452
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3397 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.375018
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380235
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396777
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3398 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403912
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403928
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MUDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1291 BEAUPRE ST.
 City MADISON HEIGHTS State MI Zip Code 48071-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3399 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUELLER, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 WEST MAIN ST

City LOUISVILLE	State KY	Zip Code 40203-1436
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARDINAL INSULATION	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350290

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MUELLER, PAUL, A., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 845 WILLOW VALLEY LAKES DRIVE

City WILLOW STREET	State PA	Zip Code 17584-9039
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407085

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. MUELLER, WENDY, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15212 CALAVERAS DR

City AUSTIN	State TX	Zip Code 78717-4635
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM INSURANCE CO	Occupation (for Individual) FIRE OPS MGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1139.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358160

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3400 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUELLER, WENDY, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15212 CALAVERAS DR

City AUSTIN	State TX	Zip Code 78717-4635
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM INSURANCE CO	Occupation (for Individual) FIRE OPS MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1139.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365858

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MUELLER, WENDY, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15212 CALAVERAS DR

City AUSTIN	State TX	Zip Code 78717-4635
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM INSURANCE CO	Occupation (for Individual) FIRE OPS MGR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1139.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368581

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. MUELLER, WENDY, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15212 CALAVERAS DR

City AUSTIN	State TX	Zip Code 78717-4635
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE FARM INSURANCE CO	Occupation (for Individual) FIRE OPS MGR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1139.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374157

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3401 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1139.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383201
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1139.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383204
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1139.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391847
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3402 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1139.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397587
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1139.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404003
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MUELLER, WENDY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15212 CALAVERAS DR
 City AUSTIN State TX Zip Code 78717-4635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE CO Occupation (for Individual) FIRE OPS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1139.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419748
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3403 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUHLESTEIN, RALPH, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8228 PINOSITAS RD

City WHITTIER	State CA	Zip Code 90605-1330
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.381790

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MUHLESTEIN, RALPH, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8228 PINOSITAS RD

City WHITTIER	State CA	Zip Code 90605-1330
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.381792

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MULANAX, SHELLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 E RIVERCREST DRIVE

City HOUSTON	State TX	Zip Code 77042-2514
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 28 / 2016
Transaction ID : SA11A.356518

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3404 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULBERRY, SUE, E.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 SOUTHRIDGE WAY

City ROSEBURG	State OR	Zip Code 97470-1106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MULBERRY & ASSOCIATES LLC	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414396

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MULE, EDWARD, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 DAIRY RD

City GREENWICH	State CT	Zip Code 06830-3447
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SILVER POINT CAPITAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.400499

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. MULE, EDWARD, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 DAIRY RD

City GREENWICH	State CT	Zip Code 06830-3447
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SILVER POINT CAPITAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.400501

Amount of Each Receipt this Period
17300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3405 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MULE, EDWARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 DAIRY RD
 City GREENWICH State CT Zip Code 06830-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVER POINT CAPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.400503
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

B. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384387
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

C. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384401
 Amount of Each Receipt this Period
 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3406 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387946
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387947
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391058
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3407 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391059
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391060
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391061
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3408 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLEN, J.D., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6820 FOOTHILL DR.
 City AMARILLO State TX Zip Code 79124-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416432
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MULLER, JOHN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2123 MUSKOGEE TRAIL
 City NOKOMIS State FL Zip Code 34275-5329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.374101
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MULLER, JOHN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2123 MUSKOGEE TRAIL
 City NOKOMIS State FL Zip Code 34275-5329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378554
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3409 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLER, JOHN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2123 MUSKOGEE TRAIL
 City NOKOMIS State FL Zip Code 34275-5329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389393
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MULLER, JOHN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2123 MUSKOGEE TRAIL
 City NOKOMIS State FL Zip Code 34275-5329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401083
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. MULLINS, BIRCH, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 SOUTH WARSON
 City ST LOUIS State MO Zip Code 63124-1207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAUR PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360312
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3410 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350123

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.360032

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Transaction ID : SA11A.360143

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3411 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLIKIN, WALTER, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 15
 City PENN VALLEY State CA Zip Code 95946-0015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364799
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MULLIKIN, WALTER, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 15
 City PENN VALLEY State CA Zip Code 95946-0015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364800
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MULLIKIN, WALTER, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 15
 City PENN VALLEY State CA Zip Code 95946-0015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366572
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3412 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391735

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391736

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391742

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3413 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391744

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398373

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. MULLIKIN, WALTER, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 15

City PENN VALLEY	State CA	Zip Code 95946-0015
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399348

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3414 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULLINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 TWIN OAKS PLACE
 City LAUREL State MS Zip Code 39440-9004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWYER Occupation (for Individual) HORTMAN HARLOW LAW.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391114
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MULLINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 TWIN OAKS PLACE
 City LAUREL State MS Zip Code 39440-9004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWYER Occupation (for Individual) HORTMAN HARLOW LAW.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MULLINS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 TWIN OAKS PLACE
 City LAUREL State MS Zip Code 39440-9004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWYER Occupation (for Individual) HORTMAN HARLOW LAW.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406017
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3415 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULVIHILL, DANIEL, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 85012
 8840 COMPLEX DR.
 City SAN DIEGO State CA Zip Code 92186-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE Occupation (for Individual) PACIFIC SOUTHWEST MORTGAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382107
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MULVIHILL, DANIEL, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 85012
 8840 COMPLEX DR.
 City SAN DIEGO State CA Zip Code 92186-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE Occupation (for Individual) PACIFIC SOUTHWEST MORTGAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382938
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MULVIHILL, DANIEL, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 85012
 8840 COMPLEX DR.
 City SAN DIEGO State CA Zip Code 92186-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE Occupation (for Individual) PACIFIC SOUTHWEST MORTGAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394134
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3416 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MULVIHILL, DANIEL, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 85012
 8840 COMPLEX DR.
 City SAN DIEGO State CA Zip Code 92186-5012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC SOUTHWEST MORTGAGE Occupation (for Individual) PACIFIC SOUTHWEST MORTGAGE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **925.00**

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.416979
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. MULZER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 365
 City SANTA CLAUS State IN Zip Code 47579-0365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1500.00**

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383278
 Amount of Each Receipt this Period **1500.00**
 Memo Item CONTRIBUTION

C. MUNCHIN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9701 WILSHIRE BLVD
 City BEVERLY HILLS State CA Zip Code 90212-2020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNE CAPITAL MANAGEMENT Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **25000.00**

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.352929
 Amount of Each Receipt this Period **25000.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3417 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUNCY, LOTA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 WOODMONT CIRCLE
 APT. 105
 City BATESVILLE State AR Zip Code 72501-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.355852
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MUNCY, LOTA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 WOODMONT CIRCLE
 APT. 105
 City BATESVILLE State AR Zip Code 72501-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369619
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. MUNCY, LOTA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 WOODMONT CIRCLE
 APT. 105
 City BATESVILLE State AR Zip Code 72501-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.395047
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3418 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MUNCY, LOTA, E., ,

Mailing Address **302 WOODMONT CIRCLE
APT. 105**

City **BATESVILLE** State **AR** Zip Code **72501-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **09 / 30 / 2016**

Transaction ID : SA11A.417227

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MUNISTERI, STEPHEN, P., ,

Mailing Address **43 RAINEY ST APT 1010**

City **AUSTIN** State **TX** Zip Code **78701-4435**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 20 / 2016**

Transaction ID : SA11A.398476

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MUNSCH, HARVEY, E., MR.,

Mailing Address **1215 RITA CIRCLE**

City **SAN ANGELO** State **TX** Zip Code **76905-4201**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **07 / 23 / 2016**

Transaction ID : SA11A.354688

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1125.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3419 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MUNSCH, HARVEY, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1215 RITA CIRCLE

City SAN ANGELO	State TX	Zip Code 76905-4201
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.377427

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. MUNSCH, HARVEY, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1215 RITA CIRCLE

City SAN ANGELO	State TX	Zip Code 76905-4201
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405119

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. MUNSCH, HARVEY, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1215 RITA CIRCLE

City SAN ANGELO	State TX	Zip Code 76905-4201
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409730

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3420 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUNSEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ROLLING HILL DRIVE
 City CHATHAM State NJ Zip Code 07928-1642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANK OF AMERICA Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.356431
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MUNSON, FRANK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 ROWAYTON AVNEUE APT 1
 City DARIEN State CT Zip Code 06853-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379503
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MURATORE, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3090
 City INCLINE VILLAGE State NV Zip Code 89450-3090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.398399
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3421 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURDOUGH, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City VERO BEACH State FL Zip Code 32967-7589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345886
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MURDOUGH, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City VERO BEACH State FL Zip Code 32967-7589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360943
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MURDOUGH, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City VERO BEACH State FL Zip Code 32967-7589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398050
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3422 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURDOUGH, SAMUEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City: CENTER HARBOR State: NH Zip Code: 03226-
 FEC ID number of contributing federal political committee: **C**
 Name of Employer (for Individual): NONE Occupation (for Individual): RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 07 / 20 / 2016
Transaction ID : SA11A.350315
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

B. MURDOUGH, SAMUEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City: CENTER HARBOR State: NH Zip Code: 03226-
 FEC ID number of contributing federal political committee: **C**
 Name of Employer (for Individual): NONE Occupation (for Individual): RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 08 / 20 / 2016
Transaction ID : SA11A.376173
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

C. MURDOUGH, SAMUEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City: CENTER HARBOR State: NH Zip Code: 03226-
 FEC ID number of contributing federal political committee: **C**
 Name of Employer (for Individual): NONE Occupation (for Individual): RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 09 / 15 / 2016
Transaction ID : SA11A.398063
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3423 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURDOUGH, SAMUEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 BENT PINE DR.
 City CENTER HARBOR State NH Zip Code 03226-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400868
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MURPHY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 PAINTED HORSE DR
 City BYRNES MILL State MO Zip Code 63025-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.348316
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MURPHY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 PAINTED HORSE DR
 City BYRNES MILL State MO Zip Code 63025-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354540
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3424 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 PAINTED HORSE DR
 City BYRNES MILL State MO Zip Code 63025-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379972
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. MURPHY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 PAINTED HORSE DR
 City BYRNES MILL State MO Zip Code 63025-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.411705
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 885.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.355838
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3425 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 885.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369606
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 885.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MURPHY, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11800 PEBBLEPOINTE PASS
 City CARMEL State IN Zip Code 46033-9671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 885.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392921
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3426 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, JAMES, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11800 PEBBLEPOINTE PASS

City CARMEL	State IN	Zip Code 46033-9671
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
885.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406863

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. MURPHY, JAMES, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11800 PEBBLEPOINTE PASS

City CARMEL	State IN	Zip Code 46033-9671
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
885.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417390

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MURPHY, JOHNYE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 905

City ARCHER CITY	State TX	Zip Code 76351-0905
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.347810

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3427 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, JOHNYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 905
 City ARCHER CITY State TX Zip Code 76351-0905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392464
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MURPHY, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1823 ARDLEIGH ROAD
 City COLUMBUS State OH Zip Code 43221-1400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389842
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MURPHY, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3993 SPRING BLVD
 City EUGENE State OR Zip Code 97405-4491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MURPHY COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360327
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3428 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W267N2899 WOODLAND DR
 City PEWAUKEE State WI Zip Code 53072-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350237
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MURPHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W267N2899 WOODLAND DR
 City PEWAUKEE State WI Zip Code 53072-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355705
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MURPHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W267N2899 WOODLAND DR
 City PEWAUKEE State WI Zip Code 53072-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359555
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3429 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W267N2899 WOODLAND DR
 City PEWAUKEE State WI Zip Code 53072-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359830
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MURPHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W267N2899 WOODLAND DR
 City PEWAUKEE State WI Zip Code 53072-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383825
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MURPHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W267N2899 WOODLAND DR
 City PEWAUKEE State WI Zip Code 53072-4474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415013
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3430 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURPHY, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **W267N2899 WOODLAND DR**

City PEWAUKEE	State WI	Zip Code 53072-4474
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) HEALTH CARE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1450.00**

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.415014

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **442 EAST 20TH ST
7F**

City NEW YORK	State NY	Zip Code 10009-8120
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
07 / 26 / 2016

Transaction ID : SA11A.356501

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **442 EAST 20TH ST
7F**

City NEW YORK	State NY	Zip Code 10009-8120
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
08 / 18 / 2016

Transaction ID : SA11A.372129

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3431 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 EAST 20TH ST
 7F
 City NEW YORK State NY Zip Code 10009-8120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372130
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MURRAY, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 EAST 20TH ST
 7F
 City NEW YORK State NY Zip Code 10009-8120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 18 / 2016
Transaction ID : SA11A.399974
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MURRAY, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 EAST 20TH ST
 7F
 City NEW YORK State NY Zip Code 10009-8120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.408268
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3432 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 EAST 20TH ST
7F

City NEW YORK State NY Zip Code 10009-8120

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2016

Transaction ID : SA11A.408270

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. MURRAY, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 EAST 20TH ST
7F

City NEW YORK State NY Zip Code 10009-8120

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2016

Transaction ID : SA11A.408271

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. MURRAY, HELEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13212 DENTON HILL

City FORT WAYNE State IN Zip Code 46845-9187

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.349426

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3433 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, HELEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13212 DENTON HILL

City FORT WAYNE	State IN	Zip Code 46845-9187
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353513

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MURRAY, HELEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13212 DENTON HILL

City FORT WAYNE	State IN	Zip Code 46845-9187
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363881

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. MURRAY, HELEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13212 DENTON HILL

City FORT WAYNE	State IN	Zip Code 46845-9187
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372428

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3434 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, HELEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13212 DENTON HILL
 City FORT WAYNE State IN Zip Code 46845-9187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384641
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MURRAY, HELEN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13212 DENTON HILL
 City FORT WAYNE State IN Zip Code 46845-9187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403022
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MURRAY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6150 ROCKHURST WAY
 City GRANITE BAY State CA Zip Code 95746-6801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTPARK ASSOCIATES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397457
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3435 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRAY, LOWELL, T., LT., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11611 GRAVELLY LAKE DR. SW
 City LAKEWOOD State WA Zip Code 98499-1407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MURRAY PACIFIC CORP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350982
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MURRAY, LOWELL, T., LT., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11611 GRAVELLY LAKE DR. SW
 City LAKEWOOD State WA Zip Code 98499-1407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MURRAY PACIFIC CORP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : SA11A.364229
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MURRAY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9147 N 119TH STREET
 City SCOTTSDALE State AZ Zip Code 85259-5941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.411657
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3436 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. MURRILL, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1932 KENILWORTH AVE

City WILMETTE	State IL	Zip Code 60091-1518
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEPHEN R MURRILL	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406240

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. MUSGRAVE, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 CLAREMONT STREET

City DEARBORN	State MI	Zip Code 48124-1308
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS INTERNATIONAL	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392483

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. MUSIL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2205 PARADISE LANE

City FLOWER MOUND	State TX	Zip Code 75022-8131
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350003

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 3437 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MUSIL, JAMES, , ,

Mailing Address 2205 PARADISE LANE

City FLOWER MOUND State TX Zip Code 75022-8131

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.402404

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MUSIL, JAMES, , ,

Mailing Address 2205 PARADISE LANE

City FLOWER MOUND State TX Zip Code 75022-8131

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.402406

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MUSIL, JAMES, , ,

Mailing Address 2205 PARADISE LANE

City FLOWER MOUND State TX Zip Code 75022-8131

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 27 / 2016
Transaction ID : SA11A.414153

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3438 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUSIL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 PARADISE LANE
 City FLOWER MOUND State TX Zip Code 75022-8131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418160
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. MUSIL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 PARADISE LANE
 City FLOWER MOUND State TX Zip Code 75022-8131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418161
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. MUSSER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4185 WINE ROAD
 City WESTMINSTER State MD Zip Code 21158-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHINQUAPIN CONTRACTING, INC. Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409481
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3439 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUTCH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 FAR HILLS AVE #6
6

City DAYTON State OH Zip Code 45419-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt **07 / 31 / 2016**

Transaction ID : SA11A.359479

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. MUTCH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 FAR HILLS AVE #6
6

City DAYTON State OH Zip Code 45419-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt **08 / 17 / 2016**

Transaction ID : SA11A.370444

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. MUTCH, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 FAR HILLS AVE #6
6

City DAYTON State OH Zip Code 45419-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 210.00

Date of Receipt **08 / 31 / 2016**

Transaction ID : SA11A.386735

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3440 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUTCH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 FAR HILLS AVE #6
 6
 City DAYTON State OH Zip Code 45419-2543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386954
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. MUTCH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 FAR HILLS AVE #6
 6
 City DAYTON State OH Zip Code 45419-2543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400044
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. MUTCH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 FAR HILLS AVE #6
 6
 City DAYTON State OH Zip Code 45419-2543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410415
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3441 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MYERS, DENNIS, M., ,
 Mailing Address P.O. BOX 26941
 City PRESCOTT VALLEY State AZ Zip Code 86312-6941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349497
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MYERS, DENNIS, M., ,
 Mailing Address P.O. BOX 26941
 City PRESCOTT VALLEY State AZ Zip Code 86312-6941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415191
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MYERS, DENNIS, M., ,
 Mailing Address P.O. BOX 26941
 City PRESCOTT VALLEY State AZ Zip Code 86312-6941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418673
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 3442 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MYERS, JOHN, , ,

Mailing Address **4411 OLIVER LANE**

City **DOUGLASVILLE** State **GA** Zip Code **30135-1960**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 31 / 2016

Transaction ID : SA11A.386856

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MYERS, JOHN, , ,

Mailing Address **4411 OLIVER LANE**

City **DOUGLASVILLE** State **GA** Zip Code **30135-1960**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.419899

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MYERS, JOHN, , ,

Mailing Address **4411 OLIVER LANE**

City **DOUGLASVILLE** State **GA** Zip Code **30135-1960**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.419907

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3443 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MYERS, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2534 ESTANCIA BLVD
 City CLEARWATER State FL Zip Code 33761-2636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419084
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. MYERS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 830 E BOUNDARY STREET
 City PERRYSBURG State OH Zip Code 43551-2405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373480
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MYOTTE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11383 SOMERSET TRAIL
 City PAINESVILLE State OH Zip Code 44077-2364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365412
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3444 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MYOTTE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11383 SOMERSET TRAIL
 City PAINESVILLE State OH Zip Code 44077-2364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406638
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MYRMEL, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9501 GREEN NEEDLE DR.
 City NEW PORT RICHEY State FL Zip Code 34655-6028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADIOWORKS LLC Occupation (for Individual) SENIOR CONSULTANT/PROJECT M/
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384878
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NACLERIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BOWIE DRIVE
 City WHITING State NJ Zip Code 08759-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354670
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3445 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NACLERIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BOWIE DRIVE
 City WHITING State NJ Zip Code 08759-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408964
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NACLERIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BOWIE DRIVE
 City WHITING State NJ Zip Code 08759-1919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419728
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NAGEL, RALPH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 17TH ST STE 2440
 City DENVER State CO Zip Code 80202-5524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERIDIEN RETIREMENT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.360813
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3446 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAGEL, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3765 PACES RDG NW
 City ATLANTA State GA Zip Code 30327-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.370957
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. NAKASAKA, KIYOSHI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 MERIVALE RD
 City CHEVY CHASE State MD Zip Code 20815-3705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RESEARCH AND CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400479
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. NAKASHIAN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 HUNTINGTON BLVD
 City HOFFMAN ESTATES State IL Zip Code 60192-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353659
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3447 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAKASHIAN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 HUNTINGTON BLVD
 City HOFFMAN ESTATES State IL Zip Code 60192-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355579
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NAKASHIAN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 HUNTINGTON BLVD
 City HOFFMAN ESTATES State IL Zip Code 60192-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379066
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NAKASHIAN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 HUNTINGTON BLVD
 City HOFFMAN ESTATES State IL Zip Code 60192-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380620
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3448 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAKASHIAN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 HUNTINGTON BLVD
 City HOFFMAN ESTATES State IL Zip Code 60192-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380623
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NAKASHIAN, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 HUNTINGTON BLVD
 City HOFFMAN ESTATES State IL Zip Code 60192-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399326
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NALAGATLA, ANIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6581 GOVE COURT
 City MASON State OH Zip Code 45040-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON AND JOHNSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346915
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3449 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NALAGATLA, ANIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6581 GOVE COURT
 City MASON State OH Zip Code 45040-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON AND JOHNSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357430
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NALAGATLA, ANIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6581 GOVE COURT
 City MASON State OH Zip Code 45040-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON AND JOHNSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365749
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NALAGATLA, ANIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6581 GOVE COURT
 City MASON State OH Zip Code 45040-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON AND JOHNSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.393633
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3450 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NALAGATLA, ANIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6581 GOVE COURT
 City MASON State OH Zip Code 45040-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSON AND JOHNSON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413923
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NANA, MAHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19900 EAST COUNTRY CLUB DRIVE 104
 City AVENTURA State FL Zip Code 33180-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARAH MEDICAL LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386722
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NANIA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 CANTERA DR. SUITE 219
 City WARRENVILLE State IL Zip Code 60555-3040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368666
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3451 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NANIA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 CANTERA DR.
 SUITE 219
 City WARRENVILLE State IL Zip Code 60555-3040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396942
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

B. NANIA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 CANTERA DR.
 SUITE 219
 City WARRENVILLE State IL Zip Code 60555-3040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398715
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. NARD, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 LEXINGTON STREET
 City WHEATON State IL Zip Code 60187-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOVAFLEX, INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390900
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3452 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NARTIN, G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3216 BRITTANY PTE
 City LANSDALE State PA Zip Code 19446-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384450
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. NARTIN, G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3216 BRITTANY PTE
 City LANSDALE State PA Zip Code 19446-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390973
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NARTIN, G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3216 BRITTANY PTE
 City LANSDALE State PA Zip Code 19446-6544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398252
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3453 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATALINA, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12705 BRIARWOOD PLACE

City POWAY	State CA	Zip Code 92064-2644
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMERCIAL TRANSPORT CONCEPTS	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352389

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NATALINA, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12705 BRIARWOOD PLACE

City POWAY	State CA	Zip Code 92064-2644
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMERCIAL TRANSPORT CONCEPTS	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375879

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NATHMAN, BARBARA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18072 W 947 ROAD

City VIAN	State OK	Zip Code 74962-2504
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359690

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3454 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATHMAN, BARBARA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18072 W 947 ROAD
 City VIAN State OK Zip Code 74962-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386902
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NATHMAN, BARBARA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18072 W 947 ROAD
 City VIAN State OK Zip Code 74962-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419489
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NAVARRO, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 LOMBARD COURT
 City COSTA MESA State CA Zip Code 92626-6926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLERGAN Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363522
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3455 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NAVARRO, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 LOMBARD COURT
 City COSTA MESA State CA Zip Code 92626-6926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLERGAN Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378396
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NAYLOR, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 MONTROSE AVENUE
 City TEMPLE TERRACE State FL Zip Code 33617-4237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373504
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. NEAL, JAY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13075 EVENING CREEK DRIVE S UNIT 2
 UNIT 246
 City SAN DIEGO State CA Zip Code 92128-8101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376356
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3456 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. NEAL, JAY, A., MR.,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016 Transaction ID : SA11A.417087
Mailing Address 13075 EVENING CREEK DRIVE S UNIT 2 UNIT 246		Amount of Each Receipt this Period 100.00
City SAN DIEGO	State CA	Zip Code 92128-8101
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NECKER, MARSHA, , ,		Date of Receipt MM / DD / YYYY 08 / 18 / 2016 Transaction ID : SA11A.372539
Mailing Address 2710 WEST 19TH STREET		Amount of Each Receipt this Period 100.00
City GREELEY	State CO	Zip Code 80634-5702
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. NECKER, MARSHA, , ,		Date of Receipt MM / DD / YYYY 09 / 21 / 2016 Transaction ID : SA11A.401326
Mailing Address 2710 WEST 19TH STREET		Amount of Each Receipt this Period 25.00
City GREELEY	State CO	Zip Code 80634-5702
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3457 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NECKER, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 WEST 19TH STREET
 City GREELEY State CO Zip Code 80634-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420353
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NECKER, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 WEST 19TH STREET
 City GREELEY State CO Zip Code 80634-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420357
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. NECKER, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 WEST 19TH STREET
 City GREELEY State CO Zip Code 80634-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420360
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3458 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NECKER, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 WEST 19TH STREET
 City GREELEY State CO Zip Code 80634-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420363
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NEEB, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1398 W ADAMS AVENUE
 City SAINT LOUIS State MO Zip Code 63122-3704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.367094
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. NEELON, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 COTUIT ROAD
 City MARSTONS MILLS State MA Zip Code 02648-1838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOSTON INTL LAW GROUP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373469
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3459 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEELON, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 COTUIT ROAD

City MARSTONS MILLS	State MA	Zip Code 02648-1838
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOSTON INTL LAW GROUP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414386

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. NEESE, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6471 TOLLBRIDGE ROAD

City BELTON	State TX	Zip Code 76513-7510
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.373621

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. NEFF, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9520 MILLS PKWY

City WEST DES MOINES	State IA	Zip Code 50266-3841
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMC	Occupation (for Individual) SURGEON
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.387020

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3460 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEFF, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9520 MILLS PKWY
 City WEST DES MOINES State IA Zip Code 50266-3841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMC Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387021
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NEFF, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9520 MILLS PKWY
 City WEST DES MOINES State IA Zip Code 50266-3841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMC Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419519
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NEGROPONTE, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 CLEVELAND AVENUE NW
 City WASHINGTON State DC Zip Code 20008-3533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCLARTY ASSOCIATES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414395
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3461 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEIGHBORS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1024

City LAKE STEVENS	State WA	Zip Code 98258-1024
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) TERRA SERVICES	Occupation (for Individual) EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016
Transaction ID : SA11A.367978

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NEISS, EDWARD, S., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 200 CHARTER OAK DRIVE

City NEW CANAAN	State CT	Zip Code 06840-6703
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016
Transaction ID : SA11A.356216

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NELMS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 620 BROADSMOORE DR

City LAKE FOREST	State IL	Zip Code 60045-2771
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DISCOVER FINANCIAL SERVICES	Occupation (for Individual) BANKING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 15000.00	

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016
Transaction ID : SA11A.391609

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3462 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 999 THIRD AVE., SUITE 3400
 City SEATTLE State WA Zip Code 98104-4046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARCH VENTURE CORP. Occupation (for Individual) VENTURE CAPTIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.360179
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY MUTUAL Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410142
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY MUTUAL Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410144
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3463 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8830 MCAVOY DR
 City HOUSTON State TX Zip Code 77074-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY MUTUAL Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410146
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NELSON, J, ROGER, DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 S BRENTWOOD BOUELVARD APT 16D
 City CLAYTON State MO Zip Code 63105-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347873
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. NELSON, JEANNE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7834 HIXON RD
 City MINOCQUA State WI Zip Code 54548-9112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355759
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3464 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, JEANNE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7834 HIXON RD
 City MINOCQUA State WI Zip Code 54548-9112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380729
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NELSON, JEANNE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7834 HIXON RD
 City MINOCQUA State WI Zip Code 54548-9112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407968
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NELSON, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22081 SILVER SPUR RD
 City PALO CEDRO State CA Zip Code 96073-9553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIBRA HEALTH CARE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380516
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3465 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22081 SILVER SPUR RD
 City PALO CEDRO State CA Zip Code 96073-9553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIBRA HEALTH CARE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402798
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NELSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3482 COTTONWOOD RD
 City WALLA WALLA State WA Zip Code 99362-1854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391361
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. NELSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14106 BENSON STREET
 City OVERLAND PARK State KS Zip Code 66221-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 547.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354484
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3466 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14106 BENSON STREET
 City OVERLAND PARK State KS Zip Code 66221-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 547.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379998
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NELSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14106 BENSON STREET
 City OVERLAND PARK State KS Zip Code 66221-2109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 547.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408686
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NELSON, MARIAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11425 AQUILLA ROAD
 City CHARDON State OH Zip Code 44024-7925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381395
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3467 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, MARIAN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11425 AQUILLA ROAD
 City CHARDON State OH Zip Code 44024-7925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407127
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. NELSON, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 907 SPAR CT
 City NEW BERN State NC Zip Code 28560-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.343885
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NELSON, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 907 SPAR CT
 City NEW BERN State NC Zip Code 28560-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.364166
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3468 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 907 SPAR CT
 City NEW BERN State NC Zip Code 28560-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384502
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NELSON, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 907 SPAR CT
 City NEW BERN State NC Zip Code 28560-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384540
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NELSON, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 907 SPAR CT
 City NEW BERN State NC Zip Code 28560-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402983
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3469 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 POLLARD PARK
 City WILLIAMSBURG State VA Zip Code 23185-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 IBM INFO TECH EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.364281
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.378976
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.385899
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3470 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NELSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23043 SNAPPER LANE
 City CUDJOE KEY State FL Zip Code 33042-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NELSON, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5009 S. ELDERBERRY CIRCLE
 City SIOUX FALLS State SD Zip Code 57108-2847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408496
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. NELSON, THOMAS, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 N 73RD AVENUE
 City ELMWOOD PARK State IL Zip Code 60707-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OFFSET PRESS INC. Occupation (for Individual) PRINTING SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364215
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3471 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NERONI, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 SUMMER BREEZE COURT
 City DAYTON State OH Zip Code 45429-1965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356552
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NERONI, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 SUMMER BREEZE COURT
 City DAYTON State OH Zip Code 45429-1965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417348
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.357782
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3472 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NESTER, FOREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 BRINSON ARCH

City VIRGINIA BEACH	State VA	Zip Code 23455-5810
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370596

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NESTER, FOREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 BRINSON ARCH

City VIRGINIA BEACH	State VA	Zip Code 23455-5810
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370597

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. NESTER, FOREST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 BRINSON ARCH

City VIRGINIA BEACH	State VA	Zip Code 23455-5810
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379428

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3473 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398968
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398981
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398982
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3474 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398984
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398985
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398986
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3475 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400235
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411499
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411500
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3476 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NESTER, FOREST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 716 BRINSON ARCH
 City VIRGINIA BEACH State VA Zip Code 23455-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411501
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NETHERLAND, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 ELECTRA CIRCLE
 City SPRING State TX Zip Code 77382-2712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357933
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. NETHERCUT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 THE HIGH ROAD
 City AUSTIN State TX Zip Code 78746-2224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF TEXAS AT AUSTIN Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361363
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2625.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3477 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NETHERCUT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 THE HIGH ROAD
 City AUSTIN State TX Zip Code 78746-2224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF TEXAS AT AUSTIN Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NETHERCUT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 THE HIGH ROAD
 City AUSTIN State TX Zip Code 78746-2224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF TEXAS AT AUSTIN Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401245
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. NEUBAUER, CAROLL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1790 DERR RUN ROAD
 City BETHLEHEM State PA Zip Code 18015-5019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B.BRAUN MEDICAL INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410642
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3478 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEUHOFF, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2918 MARSHALL BLVD
 City SULLIVANS ISLAND State SC Zip Code 29482-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSP MARKETING TECHNOLOGIES, INC. Occupation (for Individual) CHAIRMAN/FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419109
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NEUMAN, CELESTE, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 EASTWOOD LANE
 City LEXINGTON State KY Zip Code 40502-3900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NEUPERT, PETER, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1603 EVERGREEN PT RD
 City MEDINA State WA Zip Code 98039-2326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEUPERT HEALTH LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360269
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3479 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWBURY, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1735 FOREST PARK DRIVE

City BILLINGS	State MT	Zip Code 59102-7950
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363524

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. NEWELL, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5900 OVERHILL ROAD

City MISSION HILLS	State KS	Zip Code 66208-1211
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352524

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. NEWELL, SHIRLEY, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5801 SUN LAKES BOULEVARD #201

City BANNING	State CA	Zip Code 92220-6507
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.357868

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3480 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWELL, SHIRLEY, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5801 SUN LAKES BOULEVARD #201

City BANNING State CA Zip Code 92220-6507

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360913

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. NEWELL, SHIRLEY, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5801 SUN LAKES BOULEVARD #201

City BANNING State CA Zip Code 92220-6507

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387597

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. NEWHOUSE, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3381 OAK HAMMOCK CT

City BONITA SPRINGS State FL Zip Code 34134-1673

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GUY CARPENTER & CO LLC Occupation (for Individual) REINSURANCE BROKER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387949

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3481 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWHOUSE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 OAK HAMMOCK CT
 City BONITA SPRINGS State FL Zip Code 34134-1673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUY CARPENTER & CO LLC Occupation (for Individual) REINSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387950
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NEWHOUSE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 SQUAM ROAD
 City NANTUCKET State MA Zip Code 02554-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383283
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

C. NEWKIRK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MULBERRY ST.
 City INDEPENDENCE State KS Zip Code 67301-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354544
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10675.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3482 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MULBERRY ST.
 City INDEPENDENCE State KS Zip Code 67301-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374591
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NEWKIRK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MULBERRY ST.
 City INDEPENDENCE State KS Zip Code 67301-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380014
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NEWKIRK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MULBERRY ST.
 City INDEPENDENCE State KS Zip Code 67301-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380497
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3483 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 MULBERRY ST.
 City INDEPENDENCE State KS Zip Code 67301-1843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408690
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352771
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355597
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3484 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt
 08 / 09 / 2016
Transaction ID : SA11A.364180
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.380178
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : SA11A.382597
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3485 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383266
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385123
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392218
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3486 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404408
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.404451
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420167
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3487 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWKIRK, MARILEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 545
 City WARSAW State MO Zip Code 65355-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422746
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NEWMAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7811 RANCH ROAD 2338
 City GEORGETOWN State TX Zip Code 78633-4145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRIO DEVELOPMENT, LLC Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391693
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NEWMAN, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1355 DORAL CIRCLE
 City RENO State NV Zip Code 89509-5802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399387
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3488 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEWMAN, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 DEVON ROAD
 City PASADENA State CA Zip Code 91103-1145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354981
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. NEWMAN, STEVEN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24342 LA MASINA COURT
 City CALABASAS State CA Zip Code 91302-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392416
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. NEWTON, MARY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 LOST MINE ROAD
 City THEODOSIA State MO Zip Code 65761-6266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389526
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3489 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEYER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DRIFTWOOD LANE
 City PALM COAST State FL Zip Code 32137-3366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.361170
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. NEYER, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DRIFTWOOD LANE
 City PALM COAST State FL Zip Code 32137-3366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389487
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. NGUYEN, LOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1295 MCLAUGHLIN AVENUE
 APT 222
 City SAN JOSE State CA Zip Code 95122-3190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375176
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3490 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, LOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1295 MCLAUGHLIN AVENUE
 APT 222
 City SAN JOSE State CA Zip Code 95122-3190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389806
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. NGUYEN, PHUNGAMH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353317
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NGUYEN, PHUNGAMH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353553
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	557.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3491 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, PHUNGAMH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9215 SANTAYA DRIVE

City FAIRFAX	State VA	Zip Code 22031-3068
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2016

Transaction ID : SA11A.385627

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. NGUYEN, PHUNGAMH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9215 SANTAYA DRIVE

City FAIRFAX	State VA	Zip Code 22031-3068
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2016

Transaction ID : SA11A.398024

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. NGUYEN, PHUNGAMH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9215 SANTAYA DRIVE

City FAIRFAX	State VA	Zip Code 22031-3068
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2016

Transaction ID : SA11A.405692

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3492 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NGUYEN, PHUNGAMH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414199
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NGUYEN, PHUNGAMH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420380
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. NGUYEN, PHUNGAMH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420382
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3493 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NHEM, SOMALY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4040 SAN FELIPE NO.159
 City HOUSTON State TX Zip Code 77027-3949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349977
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. NHEM, SOMALY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4040 SAN FELIPE NO.159
 City HOUSTON State TX Zip Code 77027-3949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.363376
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. NICHOLS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 ALCALA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32086-7167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DFS, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365141
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3494 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLSON, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 BARROW ISLAND RD
 City JUPITER State FL Zip Code 33477-1379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368767
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. NICHOLS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 ALCALA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32086-7167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DFS, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388274
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NICHOLS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 ALCALA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32086-7167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DFS, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388275
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3495 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 ALCALA DRIVE
 City ST. AUGUSTINE State FL Zip Code 32086-7167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DFS, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 11 / 2016**
Transaction ID : SA11A.394596
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NICHOLSON, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 BARROW ISLAND RD
 City JUPITER State FL Zip Code 33477-1379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NICHOLSON, CHARLOTTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 BARROW ISLAND RD
 City JUPITER State FL Zip Code 33477-1379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405970
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3496 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 S. BROADWAY
 POBOX 426
 City CHECOTAH State OK Zip Code 74426-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352313
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. NICHOLS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 S. BROADWAY
 POBOX 426
 City CHECOTAH State OK Zip Code 74426-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361339
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. NICHOLS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 S. BROADWAY
 POBOX 426
 City CHECOTAH State OK Zip Code 74426-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375859
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3497 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 S. BROADWAY
POBOX 426

City CHECOTAH State OK Zip Code 74426-3807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384850

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. NICHOLS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 S. BROADWAY
POBOX 426

City CHECOTAH State OK Zip Code 74426-3807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401455

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. NICHOLS, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 S. BROADWAY
POBOX 426

City CHECOTAH State OK Zip Code 74426-3807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLN INC Occupation (for Individual) GROCER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414914

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3498 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLSON, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5403 WILLERS WAY

City HOUSTON	State TX	Zip Code 77056-4232
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEWMARK GRUSS KNIGHT FRANK	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372140

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. NICHOLSON, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5403 WILLERS WAY

City HOUSTON	State TX	Zip Code 77056-4232
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NEWMARK GRUSS KNIGHT FRANK	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.414916

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. NICHOL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 WELLINGTON COURT

City WEST FARGO	State ND	Zip Code 58078-4237
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEERING
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
236.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2016

Transaction ID : SA11A.359869

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	359.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3499 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 WELLINGTON COURT
 City WEST FARGO State ND Zip Code 58078-4237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384747
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. NICHOL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 WELLINGTON COURT
 City WEST FARGO State ND Zip Code 58078-4237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419631
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. NICHOLS, LARRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7011 N COUNTRY CLUB DR
 City OKLAHOMA CITY State OK Zip Code 73116-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.399143
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50118.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3500 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 BRAEMAR ROAD

City SHREVEPORT	State LA	Zip Code 71106-8534
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EAGLE DISTRIBUTING OF SHREVEPORT	Occupation (for Individual) TREASURER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414085

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357165

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390650

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3501 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Date of Receipt
MM / DD / YYYY
09 / 15 / 2016
Transaction ID : SA11A.398285

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016
Transaction ID : SA11A.409178

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. NICHOLAS, PHYLLIS, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40 HOWARD ROAD

City GREENWICH	State CT	Zip Code 06831-3104
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 850.00	

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016
Transaction ID : SA11A.410138

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3502 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICHOLS, POLLY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7011 N COUNTRY CLUB DR
 City OKLAHOMA CITY State OK Zip Code 73116-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.399142
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. NICHOLS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 BRAEMAR ROAD
 City SHREVEPORT State LA Zip Code 71106-8534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 EAGLE DISTRIBUTING OF SHREVEPORT BUSINESS MAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414104
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. NICK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 SENECA RD
 City GREAT FALLS State VA Zip Code 22066-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355361
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 51100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3503 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 SENECA RD
 City GREAT FALLS State VA Zip Code 22066-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370023
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. NICK, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 SENECA RD
 City GREAT FALLS State VA Zip Code 22066-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415903
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. NICKEL, JAMES, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 60679
 City BAKERSFIELD State CA Zip Code 93386-0679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRAVO MANAGEMENT CO Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386195
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3504 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICKEL, JAMES, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 60679
 City BAKERSFIELD State CA Zip Code 93386-0679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRAVO MANAGEMENT CO Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407861
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. NICKLE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22516 DEER MEADOW DRIVE
 City DEADWOOD State SD Zip Code 57732-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355254
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NICKLE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22516 DEER MEADOW DRIVE
 City DEADWOOD State SD Zip Code 57732-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355255
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3505 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICKLE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22516 DEER MEADOW DRIVE
 City DEADWOOD State SD Zip Code 57732-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403978
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NICKLE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22516 DEER MEADOW DRIVE
 City DEADWOOD State SD Zip Code 57732-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403984
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NICKLE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22516 DEER MEADOW DRIVE
 City DEADWOOD State SD Zip Code 57732-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410289
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3506 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICKLE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22516 DEER MEADOW DRIVE
 City DEADWOOD State SD Zip Code 57732-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410293
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NICOLL, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7703 VERNA WAY
 City LUCERNE State CA Zip Code 95458-8593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353863
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NICOLL, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7703 VERNA WAY
 City LUCERNE State CA Zip Code 95458-8593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356390
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3507 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICOLL, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7703 VERNA WAY
 City LUCERNE State CA Zip Code 95458-8593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358424
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NICOLL, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7703 VERNA WAY
 City LUCERNE State CA Zip Code 95458-8593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370791
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NICOSON, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 WEST COUNTY ROAD 300 SOUTH
 City CORY State IN Zip Code 47846-8046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NICOSON FARMS, INC. Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415960
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3508 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NICOUD, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3559 MT. DIABLO BLVD, PMB #2
 City LAFAYETTE State CA Zip Code 94549-8302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIBSON DUNN & CRUTCHER LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350552
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NIELSEN, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 SINCLAIR LANE
 City SNOWMASS VILLAGE State CO Zip Code 81615-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.402359
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. NIELSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55510 GLEN AIKEN CRK. RD.
 City COQUILLE State OR Zip Code 97423-8787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.360166
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3509 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIELSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55510 GLEN AIKEN CRK. RD.
 City COQUILLE State OR Zip Code 97423-8787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 04 / 2016
Transaction ID : SA11A.363102
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. NIELSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55510 GLEN AIKEN CRK. RD.
 City COQUILLE State OR Zip Code 97423-8787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.380181
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. NIELSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55510 GLEN AIKEN CRK. RD.
 City COQUILLE State OR Zip Code 97423-8787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 03 / 2016
Transaction ID : SA11A.389220
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3510 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NIELSEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55510 GLEN AIKEN CRK. RD.

City COQUILLE	State OR	Zip Code 97423-8787
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2016

Transaction ID : SA11A.400019

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NIELSEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55510 GLEN AIKEN CRK. RD.

City COQUILLE	State OR	Zip Code 97423-8787
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.403243

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. NIELSEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55510 GLEN AIKEN CRK. RD.

City COQUILLE	State OR	Zip Code 97423-8787
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.403267

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3511 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIELSEN, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11821 ABERDEEN LANDING TER

City MIDLOTHIAN	State VA	Zip Code 23113-1396
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THETFORD FINANCIAL SERVICES	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389429

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. NIEMANN, RICHARD, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2408 OLD ORCHARD ROAD #Q

City QUINCY	State IL	Zip Code 62305-6509
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIEMANN FOODS INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394904

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. NIEMEIER, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2619 TIMBER RIDGE DR

City TEMPLE	State TX	Zip Code 76502-8804
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BGFN	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413506

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3512 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIEMEIER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2619 TIMBER RIDGE DR
 City TEMPLE State TX Zip Code 76502-8804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGFN Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413507
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. NIERENBERG, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19605 NE 8TH ST
 City CAMAS State WA Zip Code 98607-9252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIERENBERG INVESTMENT MANAGEMENT Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367943
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. NIKKEL, JOHN, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6625 S JAMESTOWN AVENUE
 City TULSA State OK Zip Code 74136-2610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.343875
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3513 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIKLASON, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 81
 City TETONIA State ID Zip Code 83452-0081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389258
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NIKLASON, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 81
 City TETONIA State ID Zip Code 83452-0081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394198
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NIKLASON, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 81
 City TETONIA State ID Zip Code 83452-0081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397702
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3514 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NIKLASON, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 81
 City TETONIA State ID Zip Code 83452-0081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397703
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NIKLASON, LOREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 81
 City TETONIA State ID Zip Code 83452-0081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403953
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349314
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3515 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374681
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390064
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399602
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3516 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.406134
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.406136
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 09 / 26 / 2016
Transaction ID : SA11A.407562
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3517 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407563
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416843
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416844
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3518 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418353
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. NIMMER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6717 NE 181ST ST
 201
 City KENMORE State WA Zip Code 98028-4837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418355
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. NING, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 ELK LAKE DRIVE
 City ESCONDIDO State CA Zip Code 92029-5420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366141
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3519 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NIRMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5914 TREE SHADOW TRAIL
 City DALLAS State TX Zip Code 75252-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMOR WEALTH MANAGEMENT Occupation (for Individual) FINANCIAL PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373299
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NIRMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5914 TREE SHADOW TRAIL
 City DALLAS State TX Zip Code 75252-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARMOR WEALTH MANAGEMENT Occupation (for Individual) FINANCIAL PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400192
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NISSAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6715 N MINNEHAHA AVENUE
 City LINCOLNWOOD State IL Zip Code 60712-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346227
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3520 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NITZSCHE, HERMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 WADSWORTH AVENUE

City PLAINFIELD	State NJ	Zip Code 07060-2742
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

Transaction ID : SA11A.352118

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. NIX, BRENDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1541

City ATHENS	State TX	Zip Code 75751-1541
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARM/ RANCH/ INVESTMENTS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2016

Transaction ID : SA11A.383216

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. NIX, BRENDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1541

City ATHENS	State TX	Zip Code 75751-1541
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARM/ RANCH/ INVESTMENTS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.405913

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3521 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352458
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362514
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370680
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

100.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3522 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375909
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386047
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NOBLE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City GAINESVILLE State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391789
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3523 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBLE, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4015 OAK HARBOUR CIR

City GAINESVILLE	State GA	Zip Code 30506-3061
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401500

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NOBLE, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4015 OAK HARBOUR CIR

City GAINESVILLE	State GA	Zip Code 30506-3061
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405797

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. NOBLE, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4015 OAK HARBOUR CIR

City GAINESVILLE	State GA	Zip Code 30506-3061
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INDEPENDENT CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405834

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3524 OF 5722
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. **NOBLE, ELIZABETH, , ,**
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City Gainesville State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405841
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. **NOBLE, ELIZABETH, , ,**
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City Gainesville State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411430
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. **NOBLE, ELIZABETH, , ,**
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 OAK HARBOUR CIR
 City Gainesville State GA Zip Code 30506-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419419
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3525 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOBLE, RJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 2900**
 City **EDWARDS** State **CO** Zip Code **81632-2900**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391019
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

B. NOGGLE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **3096 SCHOLARSHIP**
 City **IRVINE** State **CA** Zip Code **92612-4420**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355742
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. NOGGLE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **3096 SCHOLARSHIP**
 City **IRVINE** State **CA** Zip Code **92612-4420**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380718
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **450.00**
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3526 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOGGLE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3096 SCHOLARSHIP
 City IRVINE State CA Zip Code 92612-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.408003
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. NOLAN, DAVID, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E 80TH STREET
 City NEW YORK State NY Zip Code 10075-0305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLENNIUM PARTNERS Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.362855
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. NOLAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2183 CRESTVIEW DRIVE
 City LAGUNA BEACH State CA Zip Code 92651-3448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352584
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3527 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2183 CRESTVIEW DRIVE
 City LAGUNA BEACH State CA Zip Code 92651-3448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358427
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NOLAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2183 CRESTVIEW DRIVE
 City LAGUNA BEACH State CA Zip Code 92651-3448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365025
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NOLAN, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2183 CRESTVIEW DRIVE
 City LAGUNA BEACH State CA Zip Code 92651-3448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388717
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3528 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLAN, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6411 FAUSTINO WAY
City SACRAMENTO State CA Zip Code 95831-1076
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347546
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NOLAN, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6411 FAUSTINO WAY
City SACRAMENTO State CA Zip Code 95831-1076
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368588
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. NOLAN, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6411 FAUSTINO WAY
City SACRAMENTO State CA Zip Code 95831-1076
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384468
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3529 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLAN, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6411 FAUSTINO WAY
 City SACRAMENTO State CA Zip Code 95831-1076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384489
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NOLAN, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6411 FAUSTINO WAY
 City SACRAMENTO State CA Zip Code 95831-1076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394385
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NOLAN, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6411 FAUSTINO WAY
 City SACRAMENTO State CA Zip Code 95831-1076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 09 / 13 / 2016
Transaction ID : SA11A.394400
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3530 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLAN, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6411 FAUSTINO WAY

City SACRAMENTO	State CA	Zip Code 95831-1076
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398811

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. NOLAN, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6411 FAUSTINO WAY

City SACRAMENTO	State CA	Zip Code 95831-1076
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398812

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. NOLAN, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6411 FAUSTINO WAY

City SACRAMENTO	State CA	Zip Code 95831-1076
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398814

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3531 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350409
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359737
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365073
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3532 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380812
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387250
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. NOLTE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 RED OAK RD
 City FAIRFIELD State CT Zip Code 06824-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387255
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3533 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 96 RED OAK RD

City FAIRFIELD	State CT	Zip Code 06824-1815
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387925

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. NOLTE, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 96 RED OAK RD

City FAIRFIELD	State CT	Zip Code 06824-1815
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387926

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. NOLTE, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 96 RED OAK RD

City FAIRFIELD	State CT	Zip Code 06824-1815
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398942

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3534 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6505 E. ELLIS ST.
City MESA State AZ Zip Code 85205-6020
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385023
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NOLTE, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6505 E. ELLIS ST.
City MESA State AZ Zip Code 85205-6020
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397580
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NOLTE, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6505 E. ELLIS ST.
City MESA State AZ Zip Code 85205-6020
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397583
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3535 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. NOLTE, JUDITH, , ,

Mailing Address 6505 E. ELLIS ST.

City MESA State AZ Zip Code 85205-6020

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403496

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NOLTE, JUDITH, , ,

Mailing Address 6505 E. ELLIS ST.

City MESA State AZ Zip Code 85205-6020

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403500

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NOLTE, JUDITH, , ,

Mailing Address 6505 E. ELLIS ST.

City MESA State AZ Zip Code 85205-6020

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.417875

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3536 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6505 E. ELLIS ST.
 City MESA State AZ Zip Code 85205-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417877
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NOLTE, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4103 S BURRELL ST.
 City MILWAUKEE State WI Zip Code 53207-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.B. BOTTLE SUPPLY CO. Occupation (for Individual) FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349892
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NOLTE, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4103 S BURRELL ST.
 City MILWAUKEE State WI Zip Code 53207-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.B. BOTTLE SUPPLY CO. Occupation (for Individual) FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418499
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3537 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOLTE, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4103 S BURRELL ST.
 City MILWAUKEE State WI Zip Code 53207-4405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.B. BOTTLE SUPPLY CO. Occupation (for Individual) FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418532
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

B. NOMMENSEN, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 CLEARWATER DR.
 City ONALASKA State WI Zip Code 54650-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIBERPRO, INC Occupation (for Individual) OWNER, MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368908
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. NOONAN, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 LOCUST AVENUE
 City SAN RAFAEL State CA Zip Code 94901-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAUL ZAENTZ CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366326
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3538 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOONAN, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 LOCUST AVENUE
 City SAN RAFAEL State CA Zip Code 94901-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAUL ZAENTZ CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389437
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. NOONE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4810 BENTONBROOK DRIVE
 City FAIRFAX State VA Zip Code 22030-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERCURY Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398463
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. NORDLING, NEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7477 115TH STREET NORTH
 City WHITE BEAR LAKE State MN Zip Code 55110-6186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MULTIFEEDER TECHNOLOGY Occupation (for Individual) BUSINESS EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390304
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1450.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3539 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOREHAD, ARMAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2410 FOX MEDOW LANE
 City NORTHFIELD State IL Zip Code 60093-4303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404865
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOB WHITE DRIVE
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355762
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

C. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOB WHITE DRIVE
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380717
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3540 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOB WHITE DRIVE
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383746
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOB WHITE DRIVE
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404606
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NORFLEET, GLENN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 BOB WHITE DRIVE
 City MANCHESTER State TN Zip Code 37355-5920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1015.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407956
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	205.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3541 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORFLEET, GLENN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98 BOB WHITE DRIVE

City MANCHESTER	State TN	Zip Code 37355-5920
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1015.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415753

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. NORFLEET, GLENN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98 BOB WHITE DRIVE

City MANCHESTER	State TN	Zip Code 37355-5920
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1015.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417629

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. NORMAND, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98 BEAN ROAD

City MERRIMACK	State NH	Zip Code 03054-2408
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397530

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3542 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORRIS, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1112 MULBERRY ACRES DR

City BRYANT	State AR	Zip Code 72019-6356
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.354820

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. NORRIS, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1112 MULBERRY ACRES DR

City BRYANT	State AR	Zip Code 72019-6356
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.354821

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. NORRIS, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1112 MULBERRY ACRES DR

City BRYANT	State AR	Zip Code 72019-6356
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414300

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3543 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORRIS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 MULBERRY ACRES DR
 City BRYANT State AR Zip Code 72019-6356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414303
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. NORRIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 146
 City SUN VALLEY State ID Zip Code 83353-0146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354494
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NORRIS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 146
 City SUN VALLEY State ID Zip Code 83353-0146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368942
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3544 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORRIS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BOX 146**

City **SUN VALLEY** State ID _____ Zip Code **83353-0146**

FEC ID number of contributing federal political committee. **C** _____

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 _____ **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11A.379997

Amount of Each Receipt this Period
 _____ **250.00**

Memo Item
CONTRIBUTION

B. NORRIS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BOX 146**

City **SUN VALLEY** State ID _____ Zip Code **83353-0146**

FEC ID number of contributing federal political committee. **C** _____

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 _____ **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11A.398674

Amount of Each Receipt this Period
 _____ **250.00**

Memo Item
CONTRIBUTION

C. NORRIS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BOX 146**

City **SUN VALLEY** State ID _____ Zip Code **83353-0146**

FEC ID number of contributing federal political committee. **C** _____

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 _____ **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2016

Transaction ID : SA11A.408660

Amount of Each Receipt this Period
 _____ **250.00**

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► _____ **750.00**

TOTAL This Period (last page this line number only)..... ► _____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3545 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTH, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16352 MORNINGSIDE DR
 City EDMOND State OK Zip Code 73013-3038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363804
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. NORTH, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16352 MORNINGSIDE DR
 City EDMOND State OK Zip Code 73013-3038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383916
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. NORTH, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16352 MORNINGSIDE DR
 City EDMOND State OK Zip Code 73013-3038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383989
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3546 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTHQUEST, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7532 BROOKSTONE CIR.
 City FLOWERY BRANCH State GA Zip Code 30542-7711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385075
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NORTHQUEST, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7532 BROOKSTONE CIR.
 City FLOWERY BRANCH State GA Zip Code 30542-7711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385095
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NORTH, TEDDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16352 MORNINGSIDE DRIVE
 City EDMOND State OK Zip Code 73013-3038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408913
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3547 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTH, TEDDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16352 MORNINGSIDE DRIVE

City EDMOND	State OK	Zip Code 73013-3038
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.421980

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. NORTON, FLOYD, LIGON, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4107 BRADLEY LANE

City CHEVY CHASE	State MD	Zip Code 20815-5236
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MORGAN LEWIS	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.380944

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. NOVAK, PERO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9310 AMBERWOOD DR.

City KIRTLAND	State OH	Zip Code 44094-8634
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353560

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3548 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOVAK, PERO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9310 AMBERWOOD DR.

City KIRTLAND	State OH	Zip Code 44094-8634
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11A.380341

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. NOVAK, PERO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9310 AMBERWOOD DR.

City KIRTLAND	State OH	Zip Code 44094-8634
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2016

Transaction ID : SA11A.391011

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. NOVAK, PERO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9310 AMBERWOOD DR.

City KIRTLAND	State OH	Zip Code 44094-8634
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407973

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3549 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NOVOGRADAC, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 GLORIETTA BLVD
 City ORINDA State CA Zip Code 94563-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOVOGRADAC & COMPANY LLP Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409755
 Amount of Each Receipt this Period 12000.00
 Memo Item CONTRIBUTION

B. NOWAK, GERALD, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18308 BUCCANEER TER
 City LEESBURG State VA Zip Code 20176-8474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERIDIAN CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371070
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. NTIM, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 D'ALLESIO DRIVE
 City CARTERET State NJ Zip Code 07008-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK MARRIOTT MARQUIS Occupation (for Individual) HOTEL EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390901
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	14950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3550 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NUBEL, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 S. FIGUEROA STREET
SUITE 600

City LOS ANGELES State CA Zip Code 90017-5556

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAUM COMMERCIAL REAL ESTATE Occupation (for Individual) PRESIDENT/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392015

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. NUBER, ROBERT, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2314 37TH AVENUE SW

City SEATTLE State WA Zip Code 98126-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370914

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. NUBER, ROBERT, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2314 37TH AVENUE SW

City SEATTLE State WA Zip Code 98126-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409667

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3551 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NUGENT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6207 W. GOLFRIDGE DR.
 City EAST LANSING State MI Zip Code 48823-9741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378710
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NUTTALL, ELLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2298 N 1430 E
 City PROVO State UT Zip Code 84604-2166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372565
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. NYSEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1030
 City BONSALL State CA Zip Code 92003-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETGEAR INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358940
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3552 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NYSEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1030
 City BONSALL State CA Zip Code 92003-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NETGEAR INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387861
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. O' BRIEN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 CHANCELLOR DRIVE
 City PLANO State TX Zip Code 75074-4722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361349
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. O'BERRY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10159 N 119TH PLACE
 City SCOTTSDALE State AZ Zip Code 85259-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.400938
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3553 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'BERRY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10159 N 119TH PLACE
 City SCOTTSDALE State AZ Zip Code 85259-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414952
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. O'BERRY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10159 N 119TH PLACE
 City SCOTTSDALE State AZ Zip Code 85259-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416407
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. O'BRATE, CECIL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 399
 City GARDEN CITY State KS Zip Code 67846-0399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AWI Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.361137
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3554 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'BRIEN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1150 CONNER STATION ROAD
 City SIMPSONVILLE State KY Zip Code 40067-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) O'BRIEN AUTO TEAM Occupation (for Individual) AUTO DEALERSHIPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391628
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. O'BRIEN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4240 GALT OCEAN DRIVE UNIT 1801
 City FORT LAUDERDALE State FL Zip Code 33308-6179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRICK T. O'BRIEN PA Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407842
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. O'BRIEN, PATRICIA, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 E 86TH STREET APT 20D
 City NEW YORK State NY Zip Code 10028-7533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376536
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3555 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'CONNOR, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W5380 MARTIN LANE
 City FOND DU LAC State WI Zip Code 54935-2729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412467
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. O'CONNELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 FOX RIDGE RD
 City SAINT LOUIS State MO Zip Code 63131-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354437
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. O'CONNOR, THOMAS, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1398
 City VICTORIA State TX Zip Code 77902-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345258
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7950.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3556 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DELL, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3442 AMMA ROAD
 City AMMA State WV Zip Code 25005-9540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL PIPELINE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357912
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. O'DELL, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3442 AMMA ROAD
 City AMMA State WV Zip Code 25005-9540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL PIPELINE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406888
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 726.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344398
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1032.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3557 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 726.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350921
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 726.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350922
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. O'DONNELL, GERMAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 SO.HENNEPIN ST.
 City SIOUX CITY State IA Zip Code 51106-4419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 726.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365644
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3558 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, GERMAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3421 SO.HENNEPIN ST.

City SIOUX CITY	State IA	Zip Code 51106-4419
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
726.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397780

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. O'DONNELL, GERMAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3421 SO.HENNEPIN ST.

City SIOUX CITY	State IA	Zip Code 51106-4419
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
726.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397782

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. O'DONNELL, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 DOWNER DR

City HAMPTON	State NH	Zip Code 03842-1552
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355726

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3559 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNER DR
 City HAMPTON State NH Zip Code 03842-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357148
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. O'DONNELL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNER DR
 City HAMPTON State NH Zip Code 03842-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 06 / 2016**
Transaction ID : SA11A.363340
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. O'DONNELL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNER DR
 City HAMPTON State NH Zip Code 03842-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374255
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3560 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNER DR
 City HAMPTON State NH Zip Code 03842-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380703
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. O'DONNELL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNER DR
 City HAMPTON State NH Zip Code 03842-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 09 / 06 / 2016
Transaction ID : SA11A.390677
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. O'DONNELL, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 DOWNER DR
 City HAMPTON State NH Zip Code 03842-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 09 / 26 / 2016
Transaction ID : SA11A.407975
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3561 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, JOHN, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 DOWNER DR

City HAMPTON	State NH	Zip Code 03842-1552
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.410183

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. O'DONNELL, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 63

City IVANHOE	State NC	Zip Code 28447-0063
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2016

Transaction ID : SA11A.346871

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

C. O'DONNELL, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 63

City IVANHOE	State NC	Zip Code 28447-0063
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
203.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2016

Transaction ID : SA11A.346872

Amount of Each Receipt this Period
18.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	73.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3562 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DONNELL, PATRICK, , ,

Mailing Address **P.O. BOX 63**

City IVANHOE	State NC	Zip Code 28447-0063
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **203.00**

Date of Receipt
07 / 12 / 2016

Transaction ID : SA11A.346897

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DONNELL, PATRICK, , ,

Mailing Address **P.O. BOX 63**

City IVANHOE	State NC	Zip Code 28447-0063
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **203.00**

Date of Receipt
07 / 28 / 2016

Transaction ID : SA11A.357629

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DONNELL, PATRICK, , ,

Mailing Address **P.O. BOX 63**

City IVANHOE	State NC	Zip Code 28447-0063
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **203.00**

Date of Receipt
08 / 28 / 2016

Transaction ID : SA11A.382733

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3563 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'HALLA, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1734 WYNGATE DR.
 City TROY State MI Zip Code 48098-6545
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) MCLAREN HEALTHCARE CORP Occupation (for Individual) EXEC. VP/COO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409193
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. O'HOLLAREN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5050 SW HILLTOP LANE
 City PORTLAND State OR Zip Code 97221-2304
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NIKE Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360144
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. O'LEARY, G, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 765.00

Date of Receipt 07 / 17 / 2016
Transaction ID : SA11A.349833
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 15050.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3564 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'LEARY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.369193
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. O'LEARY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370548
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. O'LEARY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396924
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3565 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'LEARY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400259
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. O'LEARY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410393
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. O'LEARY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW
 City HOUSTON State TX Zip Code 77002-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410405
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3566 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'LEARY, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW

City HOUSTON	State TX	Zip Code 77002-3009
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) ANDREWS KURTH	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.418204

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. O'LEARY, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 TRAVIS 4200 JPMORGAN CHASE TOW

City HOUSTON	State TX	Zip Code 77002-3009
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) ANDREWS KURTH	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.422793

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. O'MALLEY, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 44 COCOANUT ROW B119

City PALM BEACH	State FL	Zip Code 33480-4069
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
07 / 09 / 2016
Transaction ID : SA11A.346697

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3567 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'MALLEY, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 COCOANUT ROW
B119

City PALM BEACH State FL Zip Code 33480-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11A.363887

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. O'MALLEY, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 COCOANUT ROW
B119

City PALM BEACH State FL Zip Code 33480-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2016

Transaction ID : SA11A.392122

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. O'NEILL, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8787 BAY COLONY DR
902

City NAPLES State FL Zip Code 34108-0779

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.418319

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3568 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'NEIL, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 N TEJON STE 310

City COLORADO SPRINGS	State CO	Zip Code 80903-1429
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE O'NEIL GROUP	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2016

Transaction ID : SA11A.374068

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. O'NEILL, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 KENSINGTON DRIVE

City RANDOLPH	State NJ	Zip Code 07869-3758
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.409600

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. O'NEIL, LILLIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2457 LEXINGTON CIRCLE

City SALT LAKE CITY	State UT	Zip Code 84124-1889
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.401690

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3569 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'NEIL, R., W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1374 HARVEST ROAD
 City PLEASANTON State CA Zip Code 94566-6047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 02 / 2016**
Transaction ID : SA11A.360058
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. O'REILLY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6001 HIGHWAY AL A #8327
 City VERO BEACH State FL Zip Code 32967-7538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.356564
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. O'REILLY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6001 NORTH AIA PMB 8327
 City VERO BEACH State FL Zip Code 32963-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379484
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3570 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O'REILLY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12824 S POTTAWATOMI COURT
 City PALOS HEIGHTS State IL Zip Code 60463-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401639
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. OBERING, WILLIAM, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 N JACKSON ST
 City JACKSON State WY Zip Code 83001-8522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391349
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. OBERSCHMIDT, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202 UDALL STREET
 City SAN DIEGO State CA Zip Code 92106-1655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3571 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OBERSCHMIDT, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202 UDALL STREET
 City SAN DIEGO State CA Zip Code 92106-1655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.364358
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. OBERSCHMIDT, ALEC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3202 UDALL STREET
 City SAN DIEGO State CA Zip Code 92106-1655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 12 / 2016
Transaction ID : SA11A.392843
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. OBMA, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 BEAUMONT
 City GREEN BAY State WI Zip Code 54301-2928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 07 / 22 / 2016
Transaction ID : SA11A.353777
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3572 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OBMA, BOB, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 BEAUMONT

City GREEN BAY	State WI	Zip Code 54301-2928
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.370005

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. OBMA, BOB, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 BEAUMONT

City GREEN BAY	State WI	Zip Code 54301-2928
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11A.375749

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. OBMA, BOB, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 BEAUMONT

City GREEN BAY	State WI	Zip Code 54301-2928
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.404195

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3573 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OBRIEN JR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21119 WOODBRIDGE DRIVE
 City FRANKFORT State IL Zip Code 60423-8821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380604
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. OBRIEN SR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO 30477
 City SEA ISLAND State GA Zip Code 31561-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383570
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. OBRIEN, SHERIDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24836 W NIPPERSINK ROAD
 City ROUND LAKE State IL Zip Code 60073-9757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSH Occupation (for Individual) MGMT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404324
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3574 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. OBRIEN, SHERIDAN, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.404325
Mailing Address 24836 W NIPPERSINK ROAD		Amount of Each Receipt this Period 1000.00
City ROUND LAKE	State IL	Zip Code 60073-9757
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) CSH	Occupation (for Individual) MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OCALLAGHAN, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 07 / 30 / 2016 Transaction ID : SA11A.359879
Mailing Address PO BOX3812		Amount of Each Receipt this Period 75.00
City CLEARWATER	State FL	Zip Code 33767-8812
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) FAE HOLDINGS INC	Occupation (for Individual) INVESTMENT BANKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OCALLAGHAN, WILLIAM, , ,		Date of Receipt MM / DD / YYYY 08 / 13 / 2016 Transaction ID : SA11A.366820
Mailing Address PO BOX3812		Amount of Each Receipt this Period 50.00
City CLEARWATER	State FL	Zip Code 33767-8812
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) FAE HOLDINGS INC	Occupation (for Individual) INVESTMENT BANKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3575 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OCALLAGHAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX3812
 City CLEARWATER State FL Zip Code 33767-8812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAE HOLDINGS INC Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384797
 Amount of Each Receipt this Period 75.00
 Memo Item
 CONTRIBUTION

B. OCALLAGHAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX3812
 City CLEARWATER State FL Zip Code 33767-8812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAE HOLDINGS INC Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419632
 Amount of Each Receipt this Period 75.00
 Memo Item
 CONTRIBUTION

C. OCONNELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 COLONY VILLAS DRIVE UNIT 2002
 City BONITA SPRINGS State FL Zip Code 34134-6948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358310
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3576 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OCONNOR, JOSEPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 806 ORANGE DRIVE
 City SILVER SPRING State MD Zip Code 20901-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DTMO Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.353908
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OCONNOR, JOSEPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 806 ORANGE DRIVE
 City SILVER SPRING State MD Zip Code 20901-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DTMO Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390879
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OCONNOR, JOSEPH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 806 ORANGE DRIVE
 City SILVER SPRING State MD Zip Code 20901-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DTMO Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405863
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3577 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODERMOTT, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 137
 City AMBOY State WA Zip Code 98601-0137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVAMERE HEALTH SERVICES Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.352931
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354807
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359175
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3578 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359177
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370322
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380877
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3579 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.380878
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.408666
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410107
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3580 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410108
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410114
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410116
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3581 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414993
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414999
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAH State GA Zip Code 31405-1084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415000
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3582 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OGDEN, LYNN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3703 TEN BROECK WAY
 City LOUISVILLE State KY Zip Code 40241-2499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363531
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. OGILVIE, STAMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 ROCKY RIVER RD
 City HOUSTON State TX Zip Code 77056-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379038
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. OGILVIE, STAMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 ROCKY RIVER RD
 City HOUSTON State TX Zip Code 77056-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408619
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3583 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. OGLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 E 12TH AVENUE #1
 City DENVER State CO Zip Code 80206-3005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407876
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. OHARA, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9719 GREEN ISLAND CV
 City WINDERMERE State FL Zip Code 34786-8965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397001
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

C. OHLS, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 STANWICH ROAD
 City GREENWICH State CT Zip Code 06830-3524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDIS PARTNERS INC Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411838
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3584 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. OHLUND, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30111 BRANDING IRON RD
 City SAN JUAN CAPISTRAN State CA Zip Code 92675-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAST ORANGE MUNICIPAL WATER DISTRICT Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11A.346981
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. OIEN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14114 VILLAGE 14
 City CAMARILLO State CA Zip Code 93012-7014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344502
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. OIEN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14114 VILLAGE 14
 City CAMARILLO State CA Zip Code 93012-7014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359974
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	557.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3585 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OIEN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14114 VILLAGE 14
 City CAMARILLO State CA Zip Code 93012-7014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364944
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OIEN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14114 VILLAGE 14
 City CAMARILLO State CA Zip Code 93012-7014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt **08 / 20 / 2016**
Transaction ID : SA11A.376219
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OIEN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14114 VILLAGE 14
 City CAMARILLO State CA Zip Code 93012-7014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378673
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3586 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.396932

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016

Transaction ID : SA11A.404352

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016

Transaction ID : SA11A.404353

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3587 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO State CA Zip Code 93012-7014

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 357.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.416051

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO State CA Zip Code 93012-7014

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 357.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.416056

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OIEN, KATHLEEN, , ,

Mailing Address 14114 VILLAGE 14

City CAMARILLO State CA Zip Code 93012-7014

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 357.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.422063

Amount of Each Receipt this Period
 25.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3588 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OIEN, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14114 VILLAGE 14

City CAMARILLO	State CA	Zip Code 93012-7014
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422064

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. OLAH, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2252 GLOAMING WAY

City BEVERLY HILLS	State CA	Zip Code 90210-1717
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347489

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. OLAH, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2252 GLOAMING WAY

City BEVERLY HILLS	State CA	Zip Code 90210-1717
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380884

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3589 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLAH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 GLOAMING WAY
 City BEVERLY HILLS State CA Zip Code 90210-1717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386357
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. OLAH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 GLOAMING WAY
 City BEVERLY HILLS State CA Zip Code 90210-1717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386782
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. OLAH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2252 GLOAMING WAY
 City BEVERLY HILLS State CA Zip Code 90210-1717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 09 / 08 / 2016
Transaction ID : SA11A.391846
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3590 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLAH, JUDITH, , ,

Mailing Address **2252 GLOAMING WAY**

City BEVERLY HILLS	State CA	Zip Code 90210-1717
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406075

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLAH, JUDITH, , ,

Mailing Address **2252 GLOAMING WAY**

City BEVERLY HILLS	State CA	Zip Code 90210-1717
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406086

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLAH, JUDITH, , ,

Mailing Address **2252 GLOAMING WAY**

City BEVERLY HILLS	State CA	Zip Code 90210-1717
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414366

Amount of Each Receipt this Period

25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3591 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLANDER, RICHARD, R., MR.,

Mailing Address 1742 N FITZGERALD LANE

City HANFORD	State CA	Zip Code 93230-7901
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016

Transaction ID : SA11A.347686

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLANDER, RICHARD, R., MR.,

Mailing Address 1742 N FITZGERALD LANE

City HANFORD	State CA	Zip Code 93230-7901
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11A.381008

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLANDER, RICHARD, R., MR.,

Mailing Address 1742 N FITZGERALD LANE

City HANFORD	State CA	Zip Code 93230-7901
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.401759

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3592 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLDS, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 GOLDEN EAGLE

City IRVINE	State CA	Zip Code 92603-0309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GENERATIONS HEALTHCARE	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376418

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. OLIVER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23510 SPINNING WHEEL COURT

City ALDIE	State VA	Zip Code 20105-2488
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378313

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. OLLESTAD, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 SHINGLE MILL ROAD

City WEST SIMSBURY	State CT	Zip Code 06092-2310
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387537

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3593 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLLESTAD, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 SHINGLE MILL ROAD
 City WEST SIMSBURY State CT Zip Code 06092-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417107
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376220
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382282
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3594 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384397
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384444
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387758
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3595 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398991
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399018
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403257
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3596 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLMSCHIED, PATRICIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 FAIRVIEW PLACE
 City AGOURA HILLS State CA Zip Code 91301-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE TRAINER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403293
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OLSEN, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 SCHOOLHOUSE LANE
 City LEBANON State NJ Zip Code 08833-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379688
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. OLSEN JR, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 COPPERBEECH PLACE
 City MERRICK State NY Zip Code 11566-3225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KDL SERVICES, INC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350511
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3597 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSEN JR, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 COPPERBEECH PLACE
 City MERRICK State NY Zip Code 11566-3225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KDL SERVICES, INC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376103
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OLSEN JR, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 COPPERBEECH PLACE
 City MERRICK State NY Zip Code 11566-3225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KDL SERVICES, INC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400845
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OLSEN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 OAKMERE PLACE
 City MUSKEGON State MI Zip Code 49445-2963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHERN MACHINE TOOL COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402802
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3598 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. OLSHAUSEN, RICHARD, , ,

Mailing Address 1316 CIRCLE WAY

City LAGUNA BEACH	State CA	Zip Code 92651-1305
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.348307

Amount of Each Receipt this Period
12.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. OLSHAUSEN, RICHARD, , ,

Mailing Address 1316 CIRCLE WAY

City LAGUNA BEACH	State CA	Zip Code 92651-1305
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383859

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. OLSHAUSEN, RICHARD, , ,

Mailing Address 1316 CIRCLE WAY

City LAGUNA BEACH	State CA	Zip Code 92651-1305
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383860

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	112.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3599 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSHAUSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 CIRCLE WAY
 City LAGUNA BEACH State CA Zip Code 92651-1305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387986
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. OLSON, LLOYD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3214 PRITCHARD DRIVE
 City RAVI E State WI Zip Code 53406-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353810
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. OLSON, LLOYD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3214 PRITCHARD DRIVE
 City RAVI E State WI Zip Code 53406-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375776
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3600 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, LLOYD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3214 PRITCHARD DRIVE

City RAVI E State WI Zip Code 53406-5412

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.404245

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. OLSON, NEWMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX C

City OSAKIS State MN Zip Code 56360-0603

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IST NATIONAL BANK Occupation (for Individual) BANK OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : SA11A.395055

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. OLSON, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 432 SCHOOL HOUSE LANE

City DEVON State PA Zip Code 19333-1223

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11A.414541

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3601 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 THIRD AVENUE SUITE 600
 City SEATTLE State WA Zip Code 98101-3042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARGIS ENGINEERS Occupation (for Individual) ELECTRICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372498
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. OLSZEWSKI, JOHN, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 KENDAL DRIVE
 City KENNETT SQUARE State PA Zip Code 19348-2337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369318
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. ONEAL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 MASTERS DRIVE
 City PAWLEYS ISLAND State SC Zip Code 29585-8284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346893
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3602 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ONEILL, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 6TH ST NE

City WASHINGTON	State DC	Zip Code 20002-5208
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HARBINGER STRATEGIES	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.367966

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. OPLER, EDMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 691

City WILSON	State WY	Zip Code 83014-0691
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2016

Transaction ID : SA11A.397022

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. OPPERMANN, MARCIA, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5330 SILVER SPUR AVENUE

City COLORADO SPRINGS	State CO	Zip Code 80915-2424
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.385110

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3603 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OPPERMANN, MARCIA, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5330 SILVER SPUR AVENUE

City COLORADO SPRINGS	State CO	Zip Code 80915-2424
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392660

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. OPPERMANN, MARCIA, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5330 SILVER SPUR AVENUE

City COLORADO SPRINGS	State CO	Zip Code 80915-2424
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412707

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

C. OPPERMANN, MARCIA, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5330 SILVER SPUR AVENUE

City COLORADO SPRINGS	State CO	Zip Code 80915-2424
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412708

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3604 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OPPERMANN, MARCIA, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5330 SILVER SPUR AVENUE

City COLORADO SPRINGS	State CO	Zip Code 80915-2424
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417154

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. ORCE, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 HEARTHSTONE CIRCLE

City SCARSDALE	State NY	Zip Code 10583-1202
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358395

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. ORCE, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 HEARTHSTONE CIRCLE

City SCARSDALE	State NY	Zip Code 10583-1202
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364233

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	785.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3605 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORCE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 HEARTHSTONE CIRCLE
 City SCARSDALE State NY Zip Code 10583-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383463
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. ORCE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 HEARTHSTONE CIRCLE
 City SCARSDALE State NY Zip Code 10583-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386812
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

C. ORCE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 HEARTHSTONE CIRCLE
 City SCARSDALE State NY Zip Code 10583-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.409482
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3606 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORENDAIN, TOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16835 ADDISON ROAD SUITE 100
 City ADDISON State TX Zip Code 75001-5127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOMAS S ORENDAIN Occupation (for Individual) T S ORENDAIN ASSOC. INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353299
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ORENDAIN, TOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16835 ADDISON ROAD SUITE 100
 City ADDISON State TX Zip Code 75001-5127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOMAS S ORENDAIN Occupation (for Individual) T S ORENDAIN ASSOC. INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.375687
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ORENDAIN, TOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16835 ADDISON ROAD SUITE 100
 City ADDISON State TX Zip Code 75001-5127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOMAS S ORENDAIN Occupation (for Individual) T S ORENDAIN ASSOC. INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.404201
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3607 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORSATO, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 TIPERS CIRCLE
 City HEATHSVILLE State VA Zip Code 22473-4322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390489
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ORSCHELN, BETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 RUTHERFORD DR
 City COLUMBIA State MO Zip Code 65201-9144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.358855
 Amount of Each Receipt this Period
 1250.00
 Memo Item
 CONTRIBUTION

C. ORSCHHELN, MARY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5711 BRIDLEWOOD CT
 City COLUMBIA State MO Zip Code 65203-9292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.358852
 Amount of Each Receipt this Period
 1250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3608 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORSCHELN, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 RUTHERFORD DR
 City COLUMBIA State MO Zip Code 65201-9144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.358854
 Amount of Each Receipt this Period 1250.00
 Memo Item CONTRIBUTION

B. ORSCHELN, WILLIAM, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 280
 City MOBERLY State MO Zip Code 65270-0280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORSCHELN MANAGEMENT CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.358853
 Amount of Each Receipt this Period 1250.00
 Memo Item CONTRIBUTION

C. ORTIZ, FLORENTINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34691 1/2 CAMINO CAPISTRANO
 City DANA POINT State CA Zip Code 92624-1332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374426
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3609 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORTIZ, FLORENTINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34691 1/2 CAMINO CAPISTRANO
 City DANA POINT State CA Zip Code 92624-1332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399746
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ORTIZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 STEADWELL RD
 City AMSTERDAM State NY Zip Code 12010-7507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355234
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ORTIZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 STEADWELL RD
 City AMSTERDAM State NY Zip Code 12010-7507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359959
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3610 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORTIZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 STEADWELL RD
 City AMSTERDAM State NY Zip Code 12010-7507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384821
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ORTIZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 STEADWELL RD
 City AMSTERDAM State NY Zip Code 12010-7507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405962
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ORTIZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 STEADWELL RD
 City AMSTERDAM State NY Zip Code 12010-7507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413996
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3611 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORTIZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 STEADWELL RD
 City AMSTERDAM State NY Zip Code 12010-7507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419550
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ORTIZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3302 SHALE HOLLOW DRIVE
 City EVANSVILLE State IN Zip Code 47720-8213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLD NATIONAL BANK Occupation (for Individual) CORPORATE FX MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372096
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ORTIZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3302 SHALE HOLLOW DRIVE
 City EVANSVILLE State IN Zip Code 47720-8213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLD NATIONAL BANK Occupation (for Individual) CORPORATE FX MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399830
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3612 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORTIZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3302 SHALE HOLLOW DRIVE
 City EVANSVILLE State IN Zip Code 47720-8213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLD NATIONAL BANK Occupation (for Individual) CORPORATE FX MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405377
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ORTNER, VYOLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2182 S TOLEDO AVENUE
 City PALM SPRINGS State CA Zip Code 92264-9526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378232
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. ORUM, PETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 384
 City SAINT CHARLES State IL Zip Code 60174-0384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDWEST GROUNDCOVERS LLC Occupation (for Individual) NURSEY FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389432
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3613 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ORY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 HICKORY CREEK DRIVE
 City BRANDON State FL Zip Code 33511-8059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.388924
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. OSBORN, ROBERT, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7720 CALLIE COURT
 City O'FALLON State MO Zip Code 63368-6792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361356
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. OSBORN, ROBERT, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7720 CALLIE COURT
 City O'FALLON State MO Zip Code 63368-6792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400389
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3614 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OSIECKI, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6615 OPEN MEADOW RD
 City RACINE State WI Zip Code 53402-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359058
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OSIECKI, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6615 OPEN MEADOW RD
 City RACINE State WI Zip Code 53402-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359059
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OSIECKI, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6615 OPEN MEADOW RD
 City RACINE State WI Zip Code 53402-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374210
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3615 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OSIFCHIN, RUTH, M., ,

Mailing Address 75 SOUTH BOULEVARD

City SPRING LAKE State NJ Zip Code 07762-1757

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11A.358645

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OSIFCHIN, RUTH, M., ,

Mailing Address 75 SOUTH BOULEVARD

City SPRING LAKE State NJ Zip Code 07762-1757

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11A.379598

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OST, ROBERT, , ,

Mailing Address 747 MENDOCINO AVE
SUITE 200

City SANTA ROSA State CA Zip Code 95401-4814

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OST ENGINEERING, INC Occupation (for Individual) STRUCTURAL ENGINEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : SA11A.362242

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3616 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 747 MENDOCINO AVE
 SUITE 200
 City SANTA ROSA State CA Zip Code 95401-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OST ENGINEERING, INC Occupation (for Individual) STRUCTURAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389169
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. OST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 747 MENDOCINO AVE
 SUITE 200
 City SANTA ROSA State CA Zip Code 95401-4814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OST ENGINEERING, INC Occupation (for Individual) STRUCTURAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394055
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. OSTERGAARD, TORBEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 HIGHGATE DR.
 City SAN ANTONIO State TX Zip Code 78257-1714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360258
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3617 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. OSTREM, JOHN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 W LINCOLN STREET
 City MOUNT PROSPECT State IL Zip Code 60056-2942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366132
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. OSTREM, JOHN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 W LINCOLN STREET
 City MOUNT PROSPECT State IL Zip Code 60056-2942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414776
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. OTT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1440 S. OCEAN BLVD. 5-A
 City POMPANO BEACH State FL Zip Code 33062-7346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD F. OTT, MD PA Occupation (for Individual) PLASTIC SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385906
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3618 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. OTTE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12902 SHELBYVILLE ROAD
 City LOUISVILLE State KY Zip Code 40243-1539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.346291
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. OTTEN, DOUG, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5103 SEA PINES DRIVE
 City DALLAS State TX Zip Code 75287-7555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363525
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. OTTERSON, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 INDUSTRIAL WAY
 City BENICIA State CA Zip Code 94510-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIX INDUSTRIES Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403358
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3619 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. OTTERSON, BERT, , ,			Date of Receipt MM / DD / YYYY 09 / 26 / 2016 Transaction ID : SA11A.407708
Mailing Address 4900 INDUSTRIAL WAY			Amount of Each Receipt this Period 100.00
City BENICIA	State CA	Zip Code 94510-1006	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) RIX INDUSTRIES	Occupation (for Individual) BUSINESSMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OTTERSON, BERT, , ,			Date of Receipt MM / DD / YYYY 09 / 27 / 2016 Transaction ID : SA11A.410833
Mailing Address 4900 INDUSTRIAL WAY			Amount of Each Receipt this Period 100.00
City BENICIA	State CA	Zip Code 94510-1006	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) RIX INDUSTRIES	Occupation (for Individual) BUSINESSMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OTTERSON, BERT, , ,			Date of Receipt MM / DD / YYYY 09 / 29 / 2016 Transaction ID : SA11A.415734
Mailing Address 4900 INDUSTRIAL WAY			Amount of Each Receipt this Period 100.00
City BENICIA	State CA	Zip Code 94510-1006	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) RIX INDUSTRIES	Occupation (for Individual) BUSINESSMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3620 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. OVEN, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1466

City ENID	State OK	Zip Code 73702-1466
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 405.00

Date of Receipt
 08 / 01 / 2016
Transaction ID : SA11A.358556

Amount of Each Receipt this Period
 50.00

Memo Item
 CONTRIBUTION

B. OVEN, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1466

City ENID	State OK	Zip Code 73702-1466
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 405.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : SA11A.377140

Amount of Each Receipt this Period
 35.00

Memo Item
 CONTRIBUTION

C. OVEN, DAVID, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1466

City ENID	State OK	Zip Code 73702-1466
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 405.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.395836

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3621 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OVERZET, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E. 11TH ST.
 City FOND DU LAC State WI Zip Code 54935-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354473
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. OVERZET, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E. 11TH ST.
 City FOND DU LAC State WI Zip Code 54935-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379981
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OVERZET, JOHN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E. 11TH ST.
 City FOND DU LAC State WI Zip Code 54935-5248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388414
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3622 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OVERZET, JOHN, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 239 E. 11TH ST.

City FOND DU LAC	State WI	Zip Code 54935-5248
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408703

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. OVERZET, JOHN, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 239 E. 11TH ST.

City FOND DU LAC	State WI	Zip Code 54935-5248
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418811

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. OWEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 254 MEYERMAN ROAD

City OWEGO	State NY	Zip Code 13827-6744
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERIZON	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359068

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3623 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 254 MEYERMAN ROAD

City OWEGO	State NY	Zip Code 13827-6744
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VERIZON	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388636

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. OWENBY, WILLIAM, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7123 PARK TERRACE DRIVE

City ALEXANDRIA	State VA	Zip Code 22307-2003
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406758

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. OWENS, DARRYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2119 E. LAKE OF THE ISLES PKWY

City MINNEAPOLIS	State MN	Zip Code 55405-2409
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402345

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3624 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350656
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350659
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364952
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3625 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 08 / 21 / 2016
Transaction ID : SA11A.375810
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384445
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384449
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3626 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394260
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405172
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. OWENS, E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City MARTINEZ State CA Zip Code 94553-0054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412724
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3627 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. OWENS, JAMES, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5504 N PROSPECT ROAD
 City PEORIA HEIGHTS State IL Zip Code 61616-4322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.347685
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. OZANNE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5207 MERCEDES AVE.
 City DALLAS State TX Zip Code 75206-5815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388155
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PACE, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4150 S DEMAREE A
 City VISALIA State CA Zip Code 93277-9514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386053
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3628 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PACE, LLOYD, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 4150 S DEMAREE A		Transaction ID : SA11A.419368
City VISALIA	State CA	Zip Code 93277-9514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PACKARD, JAMES, L., MR.,		Date of Receipt MM / DD / YYYY 09 / 12 / 2016
Mailing Address 7613 MCCURRY		Transaction ID : SA11A.392879
City ROSCOE	State IL	Zip Code 61073-9681
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) REGAL BELOIT	Occupation (for Individual) PRESIDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PACOCHA, BETTY, , ,		Date of Receipt MM / DD / YYYY 07 / 26 / 2016
Mailing Address 4900 TELEGRAPH RD APT 712 APT 712		Transaction ID : SA11A.356454
City VENTURA	State CA	Zip Code 93003-4169
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3629 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PACOCHA, BETTY, , ,

Mailing Address 4900 TELEGRAPH RD APT 712
 APT 712

City VENTURA State CA Zip Code 93003-4169

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : **SA11A.356464**

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PACOCHA, BETTY, , ,

Mailing Address 4900 TELEGRAPH RD APT 712
 APT 712

City VENTURA State CA Zip Code 93003-4169

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : **SA11A.417552**

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PACOCHA, BETTY, , ,

Mailing Address 4900 TELEGRAPH RD APT 712
 APT 712

City VENTURA State CA Zip Code 93003-4169

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : **SA11A.417554**

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3630 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352563
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355499
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359556
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3631 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387960
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387961
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PADEN, NANTANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ALDER PLACE
 City CHINO HILLS State CA Zip Code 91709-2063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388713
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3632 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADGETT, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 CASTLEWOOD RD
 City BALTIMORE State MD Zip Code 21210-1360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415098
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10803 BURGOYNE ROAD
 City HOUSTON State TX Zip Code 77042-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PADGETT EXPLORATION Occupation (for Individual) CONSULTING GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016
Transaction ID : SA11A.348297
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10803 BURGOYNE ROAD
 City HOUSTON State TX Zip Code 77042-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PADGETT EXPLORATION Occupation (for Individual) CONSULTING GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359899
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3633 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10803 BURGOYNE ROAD
 City HOUSTON State TX Zip Code 77042-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PADGETT EXPLORATION Occupation (for Individual) CONSULTING GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384812
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10803 BURGOYNE ROAD
 City HOUSTON State TX Zip Code 77042-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PADGETT EXPLORATION Occupation (for Individual) CONSULTING GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10803 BURGOYNE ROAD
 City HOUSTON State TX Zip Code 77042-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PADGETT EXPLORATION Occupation (for Individual) CONSULTING GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398308
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3634 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADGETT, DIANNE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10803 BURGOYNE ROAD
 City HOUSTON State TX Zip Code 77042-2719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PADGETT EXPLORATION Occupation (for Individual) CONSULTING GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419644
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PADRON, SEBASTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OAK HILL PLACE
 City SAN ANTONIO State TX Zip Code 78229-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352628
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PADRON, SEBASTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OAK HILL PLACE
 City SAN ANTONIO State TX Zip Code 78229-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382655
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3635 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PADRON, SEBASTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OAK HILL PLACE
 City SAN ANTONIO State TX Zip Code 78229-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382657
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PADRON, SEBASTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 OAK HILL PLACE
 City SAN ANTONIO State TX Zip Code 78229-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413059
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PAGAN, ANGEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UNIT 3030 BOX 0405
 City DPO State AA Zip Code 34004-0405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOD CIVILIAN Occupation (for Individual) LOG MGT SPEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399788
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3636 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAGE, GREGORY, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 512 HARRINGTON ROAD
City WAYZATA State MN Zip Code 55391-1513
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) CARGILL INC. Occupation (for Individual) EXECUTIVE DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401104
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PAGE, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2414 FRONT STREET 22
City SAN DIEGO State CA Zip Code 92101-1428
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405769
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PAGE, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2414 FRONT STREET 22
City SAN DIEGO State CA Zip Code 92101-1428
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412182
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3637 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PAGE, SUSAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 28 / 2016 Transaction ID : SA11A.412183
Mailing Address 2414 FRONT STREET 22		Amount of Each Receipt this Period 100.00
City SAN DIEGO	State CA	Zip Code 92101-1428
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PAGE, TENCH, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 16 / 2016 Transaction ID : SA11A.368313
Mailing Address 4635 SADDLEHORN DRIVE		Amount of Each Receipt this Period 250.00
City RENO	State NV	Zip Code 89511-6711
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PAIELLI, GINA, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 26 / 2016 Transaction ID : SA11A.383245
Mailing Address 5788 HERMA STREET		Amount of Each Receipt this Period 100.00
City SAN JOSE	State CA	Zip Code 95123-3409
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3638 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAIELLI, GINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5788 HERMA STREET
 City SAN JOSE State CA Zip Code 95123-3409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.383247
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. PAIELLI, GINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5788 HERMA STREET
 City SAN JOSE State CA Zip Code 95123-3409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405905
 Amount of Each Receipt this Period
 75.00
 Memo Item CONTRIBUTION

C. PAIER, ADOLF, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 PASTURE LANE
 City BYRN MAWR State PA Zip Code 19010-1763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.392482
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3639 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PAINTER, DAVID, , ,			Date of Receipt
Mailing Address 4008 STATE ROUTE 711			<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City LIGONIER	State PA	Zip Code 15658-2703	Transaction ID : SA11A.357303
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="108.00"/>
Name of Employer (for Individual) PAINTER TOOL INC.		Occupation (for Individual) MANUFACTURER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="293.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PAINTER, DAVID, , ,			Date of Receipt
Mailing Address 4008 STATE ROUTE 711			<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City LIGONIER	State PA	Zip Code 15658-2703	Transaction ID : SA11A.357304
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="108.00"/>
Name of Employer (for Individual) PAINTER TOOL INC.		Occupation (for Individual) MANUFACTURER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="293.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PALDA, JAY, C., MR.,			Date of Receipt
Mailing Address 1310 121ST STREET W			<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City ROSEMOUNT	State MN	Zip Code 55068-3742	Transaction ID : SA11A.411880
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) PALDA & SONS INC.		Occupation (for Individual) CONTRACTOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="466.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3640 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALERMO, SHAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 B AIRPORT BUSINESS CENTER
 City ASPEN State CO Zip Code 81611-3515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RMC: RESORTS MOUNTAINS CITIES Occupation (for Individual) CEO AND OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370293
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PALM, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4415 N RANGER ROAD
 City PRESCOTT VALLEY State AZ Zip Code 86314-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359684
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PALM, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4415 N RANGER ROAD
 City PRESCOTT VALLEY State AZ Zip Code 86314-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386899
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3641 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALM, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4415 N RANGER ROAD
 City PRESCOTT VALLEY State AZ Zip Code 86314-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419614
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PALMA, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 TARRANT DRIVE
 City FONTANA State WI Zip Code 53125-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FATM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405135
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PALMA, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 TARRANT DRIVE
 City FONTANA State WI Zip Code 53125-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FATM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405151
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 225.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3642 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALMA, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 TARRANT DRIVE
 City FONTANA State WI Zip Code 53125-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FATM Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405152
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PALMATIER, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 N 68TH ACE
 City YAKIMA State WA Zip Code 98908-2172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352361
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PALMATIER, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 N 68TH ACE
 City YAKIMA State WA Zip Code 98908-2172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375956
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3643 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALMER, HOPE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 REED CREEK DRIVE
 City DRAPER State VA Zip Code 24324-2865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360936
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PALMER, JEFFREY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 KINGDOM CT
 City MURRYSVILLE State PA Zip Code 15668-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400511
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. PALMER, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6069 ALDEA DR
 City EL DORADO HILLS State CA Zip Code 95762-7716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391672
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3644 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALMER, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6069 ALDEA DR
 City EL DORADO HILLS State CA Zip Code 95762-7716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402907
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PALMER, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6069 ALDEA DR
 City EL DORADO HILLS State CA Zip Code 95762-7716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402908
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PALMER, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12335 KINGSRIDE #353
 City HOUSTON State TX Zip Code 77024-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAHOE VENTURES LTD Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348979
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3645 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALMER, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12335 KINGSRIDE #353
 City HOUSTON State TX Zip Code 77024-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAHOE VENTURES LTD Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372766
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PALMER, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12335 KINGSRIDE #353
 City HOUSTON State TX Zip Code 77024-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAHOE VENTURES LTD Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399973
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PALMER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 HAZARD ROAD
 City NEWPORT State RI Zip Code 02840-4260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356179
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3646 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALMER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 HAZARD ROAD

City NEWPORT	State RI	Zip Code 02840-4260
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414723

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. PALOMBO, MARKHAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10054 STRATMORE CIRCLE

City SHREVEPORT	State LA	Zip Code 71115-3460
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OMNI	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362333

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. PALOMBO, MARKHAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10054 STRATMORE CIRCLE

City SHREVEPORT	State LA	Zip Code 71115-3460
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OMNI	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2016

Transaction ID : SA11A.390748

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3647 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALOMBO, MARKHAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10054 STRATMORE CIRCLE
 City SHREVEPORT State LA Zip Code 71115-3460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OMNI Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417770
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PALOMBO, MARKHAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10054 STRATMORE CIRCLE
 City SHREVEPORT State LA Zip Code 71115-3460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OMNI Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417853
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PALOMBO, MARKHAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10054 STRATMORE CIRCLE
 City SHREVEPORT State LA Zip Code 71115-3460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OMNI Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417872
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3648 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PALOMBO, MARKHAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10054 STRATMORE CIRCLE

City SHREVEPORT	State LA	Zip Code 71115-3460
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OMNI	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417874

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PANAS, FELICITY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 729

City RIDGEFIELD	State CT	Zip Code 06877-0729
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEROLD PANAS, LINZY & PARTNERS	Occupation (for Individual) FUNDRAISING CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.349847

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PANDOL, MATT, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32540 PETERSON RD

City DELANO	State CA	Zip Code 93215-9368
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PANDOL BROS INC	Occupation (for Individual) FARM MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.365909

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3649 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399987
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417970
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417972
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3650 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418602
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418617
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PANNILL, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SOUTH LAKE TRAIL
 City PALM BEACH State FL Zip Code 33480-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418618
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3651 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANZICA, LOUIS, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 RIVERWOODS DR
 City GRAND ISLAND State NY Zip Code 14072-2175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POWER DRIVES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.393898
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PAPE, WILLIAM, J., MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 OLD SHERMAN HILL RD
 City WOODBURY State CT Zip Code 06798-3914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN-REPUBLICAN,INC Occupation (for Individual) PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403123
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. PARCHMAN, JANALU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 LISCIO COVE
 City GEORGETOWN State TX Zip Code 78628-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399376
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3652 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARCHMAN, JANALU, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 408 LISCIO COVE

City GEORGETOWN	State TX	Zip Code 78628-4659
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405407

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

B. PARCHMAN, JANALU, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 408 LISCIO COVE

City GEORGETOWN	State TX	Zip Code 78628-4659
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409304

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

C. PARCHMAN, JANALU, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 408 LISCIO COVE

City GEORGETOWN	State TX	Zip Code 78628-4659
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409770

Amount of Each Receipt this Period
60.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3653 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARCHMAN, JANALU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 LISCIO COVE
 City GEORGETOWN State TX Zip Code 78628-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415242
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PARCHMAN, JANALU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 LISCIO COVE
 City GEORGETOWN State TX Zip Code 78628-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418764
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PARCHMAN, JANALU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 LISCIO COVE
 City GEORGETOWN State TX Zip Code 78628-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418786
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3654 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARDEE, JONATHAN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BELLEVUE AVENUE
 City NEWPORT State RI Zip Code 02840-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTELLECTUAL PROPERTY DEVELO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349557
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PARDEE, JONATHAN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BELLEVUE AVENUE
 City NEWPORT State RI Zip Code 02840-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTELLECTUAL PROPERTY DEVELO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366589
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PARDEE, JONATHAN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BELLEVUE AVENUE
 City NEWPORT State RI Zip Code 02840-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTELLECTUAL PROPERTY DEVELO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384024
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3655 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARDEE, JONATHAN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BELLEVUE AVENUE
 City NEWPORT State RI Zip Code 02840-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTELLECTUAL PROPERTY DEVELO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388186
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PARDEE, JONATHAN, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BELLEVUE AVENUE
 City NEWPORT State RI Zip Code 02840-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTELLECTUAL PROPERTY DEVELC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404413
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. PARK, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1708 S TOLUKA WAY
 City BOISE State ID Zip Code 83712-8914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414753
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3656 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARK, ROY, H., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HAMPTON HILL LANE
 City ITHACA State NY Zip Code 14850-1081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARK OUTDOOR ADV. Occupation (for Individual) ADV. MEDIA EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.373804
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PARK, ROY, H., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HAMPTON HILL LANE
 City ITHACA State NY Zip Code 14850-1081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARK OUTDOOR ADV. Occupation (for Individual) ADV. MEDIA EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392982
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PARK, ROY, H., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HAMPTON HILL LANE
 City ITHACA State NY Zip Code 14850-1081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARK OUTDOOR ADV. Occupation (for Individual) ADV. MEDIA EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414667
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3657 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, BRISCOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2711 MID LANE
 City HOUSTON State TX Zip Code 77027-4907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381309
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PARKER, C., REED, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 INDIGO LANE
 City GLENVIEW State IL Zip Code 60026-7797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.346010
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. PARKER, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5707 COSTAS CV
 City AUSTIN State TX Zip Code 78759-5529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356587
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3658 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 MADISON MCLEAN DRIVE
 City MCLEAN State VA Zip Code 22101-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377959
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. PARKER, FOXHALL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HONEY HOLLOW ROAD
 City POUND RIDGE State NY Zip Code 10576-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355372
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PARKER, FOXHALL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HONEY HOLLOW ROAD
 City POUND RIDGE State NY Zip Code 10576-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397721
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3659 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, FOXHALL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 HONEY HOLLOW ROAD
 City POUND RIDGE State NY Zip Code 10576-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419176
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PARKER, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 NORTH CAMDEN DRIVE
 City BEVERLY HILLS State CA Zip Code 90210-3040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TODAY'S FRESH START CHARTER SCHOOL Occupation (for Individual) EDUCATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388056
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PARKER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8651 E KETTLE CIR
 City CENTENNIAL State CO Zip Code 80112-2706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406187
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3660 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 POWERS LAKE TRAIL
 City WOODBURY State MN Zip Code 55129-8589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348731
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PARKER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 POWERS LAKE TRAIL
 City WOODBURY State MN Zip Code 55129-8589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PARKER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 POWERS LAKE TRAIL
 City WOODBURY State MN Zip Code 55129-8589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 18 / 2016**
Transaction ID : SA11A.399860
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3661 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, LAWRENCE, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 VIA DIJON
 City NEWPORT BEACH State CA Zip Code 92663-4630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FINAN. SYNERGISTICS GROUP Occupation (for Individual) INVET. ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379677
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PARKER, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE BOWERMAN DR
 City BEAVERTON State OR Zip Code 97005-0979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367877
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. PARKER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 CJ WISE PARKWAY
 City NAPLES State TX Zip Code 75568-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISIMET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349707
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26060.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3662 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 CJ WISE PARKWAY
 City NAPLES State TX Zip Code 75568-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISIMET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369108
 Amount of Each Receipt this Period 90.00
 Memo Item CONTRIBUTION

B. PARKER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 CJ WISE PARKWAY
 City NAPLES State TX Zip Code 75568-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISIMET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374761
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

C. PARKER, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 CJ WISE PARKWAY
 City NAPLES State TX Zip Code 75568-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISIMET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399726
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3663 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, STUART, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 DE ZAVALA PL

City SAN ANTONIO	State TX	Zip Code 78231-1446
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAA	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.360265

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. PARKER, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 356 N. CLIFTON

City BLOOMFIELD HILLS	State MI	Zip Code 48301-2502
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOM	Occupation (for Individual) INSURANCE EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403798

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PARKER, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 356 N. CLIFTON

City BLOOMFIELD HILLS	State MI	Zip Code 48301-2502
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOM	Occupation (for Individual) INSURANCE EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403801

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3664 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKER, WILLIAM, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 GARRAUX WOODS ROAD NW
 City ATLANTA State GA Zip Code 30327-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.357903
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. PARKER, WILLIAM, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 GARRAUX WOODS ROAD NW
 City ATLANTA State GA Zip Code 30327-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381277
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. PARKS, ANNETTE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 1ST AVENUE 2603
 City SEATTLE State WA Zip Code 98121-2173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370101
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3665 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10474 SANTA MONICA BOULEVARD, SUIT
 City LOS ANGELES State CA Zip Code 90025-6930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBIX MHM LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358909
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350916
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355383
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3666 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359844
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

B. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378797
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378798
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	82.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3667 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379835
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385131
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385133
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3668 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17009CROTHERS

City SAN JOSE	State CA	Zip Code 95127-1745
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
669.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386287

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PARKS, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17009CROTHERS

City SAN JOSE	State CA	Zip Code 95127-1745
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
669.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391263

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PARKS, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17009CROTHERS

City SAN JOSE	State CA	Zip Code 95127-1745
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
669.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.401598

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3669 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17009CROTHERS

City SAN JOSE	State CA	Zip Code 95127-1745
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
669.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407843

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PARKS, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17009CROTHERS

City SAN JOSE	State CA	Zip Code 95127-1745
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
669.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408349

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PARKS, THOMAS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17009CROTHERS

City SAN JOSE	State CA	Zip Code 95127-1745
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
669.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408809

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3670 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417864
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARKS, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17009CROTHERS
 City SAN JOSE State CA Zip Code 95127-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417926
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARMENTER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 S. ROCKY RIVER DR.
 City BEREA State OH Zip Code 44017-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349716
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3671 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARMENTER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 S. ROCKY RIVER DR.
 City BEREA State OH Zip Code 44017-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370719
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PARMENTER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 S. ROCKY RIVER DR.
 City BEREA State OH Zip Code 44017-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374778
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PARMENTER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 S. ROCKY RIVER DR.
 City BEREA State OH Zip Code 44017-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399607
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3672 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARMENTER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 S. ROCKY RIVER DR.
 City BEREA State OH Zip Code 44017-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404768
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PARMENTER, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 S. ROCKY RIVER DR.
 City BEREA State OH Zip Code 44017-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404769
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PARMER, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 W HOWELL ST
 City SAINT JO State TX Zip Code 76265-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370872
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3673 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARMER, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 W HOWELL ST
 City SAINT JO State TX Zip Code 76265-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370873
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PARNELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9428 OLD PACIFIC HWY
 City WOODLAND State WA Zip Code 98674-8415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL TRAINING INTERNATIONAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1988.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350898
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PARNELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9428 OLD PACIFIC HWY
 City WOODLAND State WA Zip Code 98674-8415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL TRAINING INTERNATIONAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1988.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359934
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1497.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3674 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARNELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9428 OLD PACIFIC HWY
 City WOODLAND State WA Zip Code 98674-8415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL TRAINING INTERNATIONAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1988.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384823
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

B. PARNELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9428 OLD PACIFIC HWY
 City WOODLAND State WA Zip Code 98674-8415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDUSTRIAL TRAINING INTERNATIONAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1988.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419617
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

C. PARSONAGE, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1547 PALOS VERDES MALL #404
 City WALNUT CREEK State CA Zip Code 94597-2228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359042
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 744.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3675 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARSONAGE, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1547 PALOS VERDES MALL #404
 City WALNUT CREEK State CA Zip Code 94597-2228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380205
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PARUBI, PAULIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3794 ETTMAN STREET
 City SHRUB OAK State NY Zip Code 10588-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356308
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PARUBI, PAULIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3794 ETTMAN STREET
 City SHRUB OAK State NY Zip Code 10588-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383038
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3676 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARUBI, PAULIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3794 ETTMAN STREET

City SHRUB OAK	State NY	Zip Code 10588-1008
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOSEPH GENERAL CONSTRUCTION	Occupation (for Individual) CONSTRUCTION
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.411308

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PASCALE, RICHARD, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6500 PESCADERO CREEK ROAD

City PESCADERO	State CA	Zip Code 94060-9709
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SA11A.378490

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. PASCHAL, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 904 PARKWOD CT

City MCKINNEY	State TX	Zip Code 75070-5391
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DON PASCHAL CONSULTING	Occupation (for Individual) MUNICIPAL CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2016

Transaction ID : SA11A.356298

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3677 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASCHAL, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 904 PARKWOD CT
 City MCKINNEY State TX Zip Code 75070-5391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON PASCHAL CONSULTING Occupation (for Individual) MUNICIPAL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383077
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. PASINI, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4280 GALT OCEAN DRIVE 11P
 City FT LAUDERDALE State FL Zip Code 33308-6147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350599
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PASINI, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4280 GALT OCEAN DRIVE 11P
 City FT LAUDERDALE State FL Zip Code 33308-6147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.380176
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3678 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASINI, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4280 GALT OCEAN DRIVE
11P

City FT LAUDERDALE State FL Zip Code 33308-6147

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt
09 / 06 / 2016
Transaction ID : SA11A.391187

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. PASINI, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4280 GALT OCEAN DRIVE
11P

City FT LAUDERDALE State FL Zip Code 33308-6147

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt
09 / 28 / 2016
Transaction ID : SA11A.416646

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. PASQUAN , STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 EUCALYPTUS ROAD

City BELVEDERE State CA Zip Code 94920-2436

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 27 / 2016
Transaction ID : SA11A.410532

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3679 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASQUAN , STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EUCALYPTUS ROAD
 City BELVEDERE State CA Zip Code 94920-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410541
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. PASQUAN , STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EUCALYPTUS ROAD
 City BELVEDERE State CA Zip Code 94920-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415778
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. PASQUAN , STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EUCALYPTUS ROAD
 City BELVEDERE State CA Zip Code 94920-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASQUAN LLP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415780
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3680 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405773
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407577
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407578
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3681 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418943
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034-8346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418944
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PASTORE, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11809 TROIKA COURT
 City LAKE RIDGE State VA Zip Code 22192-6284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMC Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368929
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3682 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PASTORE, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11809 TROIKA COURT
 City LAKE RIDGE State VA Zip Code 22192-6284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMC Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PATCHETT, CHARLOTTE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13385 SHADOWWOOD DR
 City BAXTER State MN Zip Code 56425-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.348181
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. PATCHETT, CHARLOTTE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13385 SHADOWWOOD DR
 City BAXTER State MN Zip Code 56425-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368909
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3683 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATCHETT, CHARLOTTE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13385 SHADOWWOOD DR
 City BAXTER State MN Zip Code 56425-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368921
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PATCHETT, CHARLOTTE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13385 SHADOWWOOD DR
 City BAXTER State MN Zip Code 56425-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368922
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PATCHETT, CHARLOTTE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13385 SHADOWWOOD DR
 City BAXTER State MN Zip Code 56425-8207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383594
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3684 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATCHETT, CHARLOTTE, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13385 SHADOWWOOD DR

City BAXTER	State MN	Zip Code 56425-8207
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383598

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PATCHETT, CHARLOTTE, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13385 SHADOWWOOD DR

City BAXTER	State MN	Zip Code 56425-8207
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.396685

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PATCHETT, CHARLOTTE, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13385 SHADOWWOOD DR

City BAXTER	State MN	Zip Code 56425-8207
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.401565

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3685 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATCHETT, CHARLOTTE, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13385 SHADOWWOOD DR

City BAXTER State MN Zip Code 56425-8207

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.418714

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PATE, BARBARA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1881 N NASH ST UNIT 1110

City ARLINGTON State VA Zip Code 22209-1568

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DAVIS & HARMAN LLP Occupation (for Individual) PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.420486

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. PATEL, BAKULESH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1670

City WILSONVILLE State OR Zip Code 97070-1670

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BHG HOTELS Occupation (for Individual) HOTELIER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.367973

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 11025.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3686 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, DINESH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 58887
 City SALT LAKE CITY State UT Zip Code 84158-0887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405672
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PATEL, DINESH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 58887
 City SALT LAKE CITY State UT Zip Code 84158-0887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413922
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PATEL, DINESH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 58887
 City SALT LAKE CITY State UT Zip Code 84158-0887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3687 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PATEL, DINESH, , ,

Mailing Address **P O BOX 58887**

City SALT LAKE CITY	State UT	Zip Code 84158-0887
-------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.419861

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PATEL, NATVERLAL, , ,

Mailing Address **3819 E. LIVINGSTONE DRIVE, #5**
5

City LONG BEACH	State CA	Zip Code 90803-2889
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380375

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PATEL, NATVERLAL, , ,

Mailing Address **3819 E. LIVINGSTONE DRIVE, #5**
5

City LONG BEACH	State CA	Zip Code 90803-2889
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380377

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3688 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH	State CA	Zip Code 90803-2889
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384451

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH	State CA	Zip Code 90803-2889
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384453

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH	State CA	Zip Code 90803-2889
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403620

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3689 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH State CA Zip Code 90803-2889

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
09 / 25 / 2016
Transaction ID : SA11A.408115

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH State CA Zip Code 90803-2889

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
09 / 28 / 2016
Transaction ID : SA11A.411908

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH State CA Zip Code 90803-2889

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
09 / 28 / 2016
Transaction ID : SA11A.412019

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3690 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH State CA Zip Code 90803-2889

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.412026

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PATEL, NATVERLAL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3819 E. LIVINGSTONE DRIVE, #5
5

City LONG BEACH State CA Zip Code 90803-2889

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.418670

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PATIENCE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 E WALTON STREET
APT. 28C

City CHICAGO State IL Zip Code 60611-2299

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) INVENTOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364470

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3691 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PATIENCE, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 77 E WALTON STREET APT. 28C		Transaction ID : SA11A.381100
City CHICAGO	State IL	Zip Code 60611-2299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) SELF	Occupation (for Individual) INVENTOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PATRICK, THOMAS, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2016
Mailing Address 282 S VIA LAS PALMAS		Transaction ID : SA11A.416484
City PALM SPRINGS	State CA	Zip Code 92262-4289
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PATRICK, THOMAS, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2016
Mailing Address 282 S VIA LAS PALMAS		Transaction ID : SA11A.416486
City PALM SPRINGS	State CA	Zip Code 92262-4289
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3692 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATRICK, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1010
 City RAVENNA State OH Zip Code 44266-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRICK INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357906
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PATRICK, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1010
 City RAVENNA State OH Zip Code 44266-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATRICK INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415334
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PATRICK, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 W SEA COLONY DR.
 City VERO BEACH State FL Zip Code 32963-5523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359354
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3693 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATRICK, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 W SEA COLONY DR.
 City VERO BEACH State FL Zip Code 32963-5523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359355
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PATTERSON, ADAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 CUMMINGS LANE
 City DURHAM State CA Zip Code 95938-9683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 439.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352437
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PATTERSON, ADAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 CUMMINGS LANE
 City DURHAM State CA Zip Code 95938-9683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 439.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375913
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3694 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTERSON, ADAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 CUMMINGS LANE
 City DURHAM State CA Zip Code 95938-9683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 439.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390222
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PATTERSON, ADAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 CUMMINGS LANE
 City DURHAM State CA Zip Code 95938-9683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 439.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390237
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PATTERSON, ADAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 CUMMINGS LANE
 City DURHAM State CA Zip Code 95938-9683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 439.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401533
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3695 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTEN, BETSEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ERIN DRIVE
 City BOW State NH Zip Code 03304-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.351033
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. PATTEN, BETSEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 ERIN DRIVE
 City BOW State NH Zip Code 03304-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384331
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PATTEN, GARY, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 MARVIN RIDGE ROAD
 City NEW CANAAN State CT Zip Code 06840-6909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406868
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3696 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8419 SCHOOLHOUSE LANE
 City ZIONSVILLE State PA Zip Code 18092-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHCARE Occupation (for Individual) ST LUKE'S UNIVERSITY HOSPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404921
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PATTERSON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 KATHERINE LANE
 City SIMSBURY State CT Zip Code 06070-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358516
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. PATTERSON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 KATHERINE LANE
 City SIMSBURY State CT Zip Code 06070-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387408
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3697 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTERSON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 KATHERINE LANE
 City SIMSBURY State CT Zip Code 06070-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391298
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PATTERSON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 KATHERINE LANE
 City SIMSBURY State CT Zip Code 06070-1234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412477
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PATTON, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7237 EADS AVE.
 City LA JOLLA State CA Zip Code 92037-5457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414871
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3698 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PATTON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 WASHINGTON AVE. S
 City KENT State WA Zip Code 98032-5767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388775
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PAULSON, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY DR 1108
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355537
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PAULSON, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY DR 1108
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398283
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3699 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULS, CAROLE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 LOMA VISTA
 APT A
 City EL SEGUNDO State CA Zip Code 90245-3695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400031
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. PAULS, CAROLE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 LOMA VISTA
 APT A
 City EL SEGUNDO State CA Zip Code 90245-3695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.419998
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. PAULS, CAROLE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 LOMA VISTA
 APT A
 City EL SEGUNDO State CA Zip Code 90245-3695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.419999
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3700 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULSEN, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 676291

City RANCHO SANTA FE	State CA	Zip Code 92067-6291
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364257

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. PAULSON, HENRY, M., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 N MICHIGAN AVE, STE 19440

City CHICAGO	State IL	Zip Code 60611-4255
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAULSON INSTITUTE	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
43800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.371561

Amount of Each Receipt this Period
33800.00

Memo Item
CONTRIBUTION

C. PAULSON, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1251 AVENUE OF THE AMERICAS

City NEW YORK	State NY	Zip Code 10020-1104
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAULSON & CO.	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421210

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	134000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3701 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULSEN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 76520 ROAD 421
 City COZAD State NE Zip Code 69130-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAULSEN, INC. Occupation (for Individual) CONSTRUCTION EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348676
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. PAULSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 W.235TH PLACE
 City TORRANCE State CA Zip Code 90501-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354725
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PAULSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 W.235TH PLACE
 City TORRANCE State CA Zip Code 90501-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.370868
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3702 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2133 W.235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.370869

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PAULSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2133 W.235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.377420

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. PAULSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2133 W.235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398696

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3703 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 W.235TH PLACE
 City TORRANCE State CA Zip Code 90501-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408899
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PAULSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 W.235TH PLACE
 City TORRANCE State CA Zip Code 90501-6045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416919
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PAULSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5501 CODY DRIVE
 City WEST DES MOINES State IA Zip Code 50266-6392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360278
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3704 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAULUS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 S. DALLAS AVE.
 City LANCASTER State TX Zip Code 75146-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN'S BICYCLES, LLC Occupation (for Individual) BIKE SHOP OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.401568
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PAVEY, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20258 HOGUE PL NE
 City POULSBO State WA Zip Code 98370-6417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352121
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PAVEY, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20258 HOGUE PL NE
 City POULSBO State WA Zip Code 98370-6417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387771
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3705 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAVEY, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20258 HOGUE PLACE NE
 City POULSBO State WA Zip Code 98370-6417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370623
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PAVEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address TWO BRATENAHL PLACE 14EX
 City CLEVELAND State OH Zip Code 44108-1183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORGENTHALER Occupation (for Individual) VENTURE CAPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352712
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PAWLAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 VENADO AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt 07 / 03 / 2016
Transaction ID : SA11A.344222
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1309.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3706 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAWLAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 VENADO AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt **07 / 13 / 2016**
Transaction ID : SA11A.347018
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PAWLAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 VENADO AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.362043
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. PAWLAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 VENADO AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt **08 / 14 / 2016**
Transaction ID : SA11A.366683
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	134.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3707 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAWLAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 VENADO AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 327.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2016
Transaction ID : SA11A.389225
 Amount of Each Receipt this Period 59.00
 Memo Item
 CONTRIBUTION

B. PAWLIK, EMIL, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 AVERY CIRCLE
 City JACKSON State MS Zip Code 39211-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUGHES EASTERN CORP Occupation (for Individual) ENGINEER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347460
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. PAWLIK, EMIL, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 AVERY CIRCLE
 City JACKSON State MS Zip Code 39211-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUGHES EASTERN CORP Occupation (for Individual) ENGINEER
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363805
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 409.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3708 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAWLIK, EMIL, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 AVERY CIRCLE
 City JACKSON State MS Zip Code 39211-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUGHES EASTERN CORP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401210
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PAXIN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9992 WHIRLAWAY LANE
 City ELK GROVE State CA Zip Code 95624-5041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC EXCAVCATION INC. Occupation (for Individual) CO-OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380320
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PAXIN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9992 WHIRLAWAY LANE
 City ELK GROVE State CA Zip Code 95624-5041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC EXCAVCATION INC. Occupation (for Individual) CO-OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407991
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3709 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAYNE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 W. RIVERSIDE #406
 City SPOKANE State WA Zip Code 99201-1099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYNE PROPERTIES & DEVELOPMENT Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387427
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PAYNE, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 490 KNOLLWOOD DRIVE
 City ROCKY MOUNT State VA Zip Code 24151-2010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346801
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PEACH, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 CENTENNIAL STREET
 City COLUMBUS State NE Zip Code 68601-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352657
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3710 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEACH, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 CENTENNIAL STREET
 City COLUMBUS State NE Zip Code 68601-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421933
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. PEACH, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 CENTENNIAL STREET
 City COLUMBUS State NE Zip Code 68601-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421943
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. PEACOCK, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 829 CONTOUR
 City SAN ANTONIO State TX Zip Code 78212-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360260
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3711 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEARCE, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2792 FOREST MILL LANE
 City JACKSONVILLE State FL Zip Code 32257-5755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEARCE & COMPANY, INC. Occupation (for Individual) INS BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373337
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PEARCE, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2792 FOREST MILL LANE
 City JACKSONVILLE State FL Zip Code 32257-5755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEARCE & COMPANY, INC. Occupation (for Individual) INS BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373338
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PEARCE, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2792 FOREST MILL LANE
 City JACKSONVILLE State FL Zip Code 32257-5755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEARCE & COMPANY, INC. Occupation (for Individual) INS BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403318
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3712 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEARSON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4206 NORTH FRACE AVENUE
 City TACOMA State WA Zip Code 98407-1706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373273
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PEARSON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4206 NORTH FRACE AVENUE
 City TACOMA State WA Zip Code 98407-1706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399315
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PEARSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 AMANDA DRIVE
 City OAK RIDGE State TN Zip Code 37830-7813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415857
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3713 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PECK, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1331 VIA ALTA
 City SANTA MARIA State CA Zip Code 93455-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANZANITA BERRY FARMS Occupation (for Individual) HR DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381926
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PECK, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1331 VIA ALTA
 City SANTA MARIA State CA Zip Code 93455-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANZANITA BERRY FARMS Occupation (for Individual) HR DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412860
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PECSAR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2160 LIMA LOOP, PMB 1-468
 City LAREDO State TX Zip Code 78045-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347308
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3714 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PECSAR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2160 LIMA LOOP, PMB 1-468
 City LAREDO State TX Zip Code 78045-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348836
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PECSAR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2160 LIMA LOOP, PMB 1-468
 City LAREDO State TX Zip Code 78045-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.349998
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PECSAR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2160 LIMA LOOP, PMB 1-468
 City LAREDO State TX Zip Code 78045-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355674
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3715 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PECSAR, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2160 LIMA LOOP, PMB 1-468

City LAREDO	State TX	Zip Code 78045-6420
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.381948

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PECSAR, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2160 LIMA LOOP, PMB 1-468

City LAREDO	State TX	Zip Code 78045-6420
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
09 / 15 / 2016
Transaction ID : SA11A.397640

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PECSAR, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2160 LIMA LOOP, PMB 1-468

City LAREDO	State TX	Zip Code 78045-6420
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
09 / 27 / 2016
Transaction ID : SA11A.414329

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3716 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEDDIE, LINDA, R., DR., DVM
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 FARIA ROAD
 City VENTURA State CA Zip Code 93001-9789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351952
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PEDDIE, LINDA, R., DR., DVM
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 FARIA ROAD
 City VENTURA State CA Zip Code 93001-9789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359356
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PEDDIE, LINDA, R., DR., DVM
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 FARIA ROAD
 City VENTURA State CA Zip Code 93001-9789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380423
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3717 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEDDIE, LINDA, R., DR., DVM
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 FARIA ROAD
 City VENTURA State CA Zip Code 93001-9789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415295
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PEDREGON, HECTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 WEST CREEK STREET
 City FREDERICKSBURG State TX Zip Code 78624-3731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PEACH TREE Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 08 / 2016**
Transaction ID : SA11A.346015
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PEDREGON, HECTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 WEST CREEK STREET
 City FREDERICKSBURG State TX Zip Code 78624-3731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PEACH TREE Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355708
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3718 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PEDREGON, HECTOR, , ,			Date of Receipt MM / DD / YYYY 08 / 31 / 2016 Transaction ID : SA11A.386868
Mailing Address 104 WEST CREEK STREET			Amount of Each Receipt this Period 50.00
City FREDERICKSBURG	State TX	Zip Code 78624-3731	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) THE PEACH TREE	Occupation (for Individual) GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PEDREGON, HECTOR, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.403804
Mailing Address 104 WEST CREEK STREET			Amount of Each Receipt this Period 100.00
City FREDERICKSBURG	State TX	Zip Code 78624-3731	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) THE PEACH TREE	Occupation (for Individual) GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PEDREGON, HECTOR, , ,			Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.403814
Mailing Address 104 WEST CREEK STREET			Amount of Each Receipt this Period 100.00
City FREDERICKSBURG	State TX	Zip Code 78624-3731	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) THE PEACH TREE	Occupation (for Individual) GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3719 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEDREGON, HECTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 WEST CREEK STREET

City FREDERICKSBURG	State TX	Zip Code 78624-3731
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE PEACH TREE	Occupation (for Individual) GENERAL MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403856

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PEDREGON, HECTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 WEST CREEK STREET

City FREDERICKSBURG	State TX	Zip Code 78624-3731
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE PEACH TREE	Occupation (for Individual) GENERAL MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403864

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PEDRICK, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5611 MOUNT ROYAL CIRCLE

City HOUSTON	State TX	Zip Code 77069-1924
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415225

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3720 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEETE, ME, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3918 WOODLAKE DRIVE

City BONITA SPRINGS	State FL	Zip Code 34134-8609
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.358461

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. PEINERT JR MD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1808 PALM VALLEY DRIVE-WEST

City HARLINGEN	State TX	Zip Code 78552-9033
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VBMC	Occupation (for Individual) ORTHOPEDIC TRAUMA SURGEON
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.384973

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PELLETIER, JERRI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 W. WACKERLY ST.

City MIDLAND	State MI	Zip Code 48640-2188
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWOOD UNIVERSITY	Occupation (for Individual) ATHLETICS OFFICE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362301

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3721 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PELLETIER, JERRI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 W. WACKERLY ST.

City MIDLAND	State MI	Zip Code 48640-2188
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWOOD UNIVERSITY	Occupation (for Individual) ATHLETICS OFFICE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : SA11A.366664

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PELLETIER, JERRI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 W. WACKERLY ST.

City MIDLAND	State MI	Zip Code 48640-2188
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWOOD UNIVERSITY	Occupation (for Individual) ATHLETICS OFFICE MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379912

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PELLETIER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 199 MAIN STREET

City VAN BUREN	State ME	Zip Code 04785-1256
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF MAINE AT FORT KENT	Occupation (for Individual) ADJUNCT PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348611

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3722 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PELLETIER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 MAIN STREET
 City VAN BUREN State ME Zip Code 04785-1256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF MAINE AT FORT KENT Occupation (for Individual) ADJUNCT PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359680
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PELLEGRINI, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 W. FLAMINGO DR. UNIT 305
 City VENICE State FL Zip Code 34285-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354533
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PELLEGRINI, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 W. FLAMINGO DR. UNIT 305
 City VENICE State FL Zip Code 34285-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380029
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3723 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PELLEGRINI, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 W. FLAMINGO DR. UNIT 305
 City VENICE State FL Zip Code 34285-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408671
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PELTES, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9447 S STAR HILL CIRCLE
 City LONE TREE State CO Zip Code 80124-5480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGES SERVICES, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372309
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PELTES, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9447 S STAR HILL CIRCLE
 City LONE TREE State CO Zip Code 80124-5480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERGES SERVICES, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384501
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3724 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PELTES, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9447 S STAR HILL CIRCLE

City LONE TREE	State CO	Zip Code 80124-5480
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENERGES SERVICES, LLC	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384505

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PELTES, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9447 S STAR HILL CIRCLE

City LONE TREE	State CO	Zip Code 80124-5480
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENERGES SERVICES, LLC	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417736

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PEMBERTON, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7080 CALDER A206

City BEAUMONT	State TX	Zip Code 77706-6061
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.376492

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3725 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEMBERTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1734
 City PRESCOTT State AZ Zip Code 86302-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396410
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PEMBERTON, LEWIS, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9820 STONEBRIDGE DR
 City YUKON State OK Zip Code 73099-3247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 MIKE JORDAN CO SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387143
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. PEMBERTON, LEWIS, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9820 STONEBRIDGE DR
 City YUKON State OK Zip Code 73099-3247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 MIKE JORDAN CO SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387149
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3726 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENBERTHY, SARANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1375 COUNTY ROAD 4195
 City CLIFTON State TX Zip Code 76634-5186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.365934
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PENBERTHY, SARANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1375 COUNTY ROAD 4195
 City CLIFTON State TX Zip Code 76634-5186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410165
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. PENCE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43959 FENNER AVE
 City LANCASTER State CA Zip Code 93536-5808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RE/MAX ALL PRO Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374314
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3727 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENCE, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 43959 FENNER AVE

City LANCASTER	State CA	Zip Code 93536-5808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RE/MAX ALL PRO	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374316

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PENCE, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 43959 FENNER AVE

City LANCASTER	State CA	Zip Code 93536-5808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RE/MAX ALL PRO	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388256

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PENCE, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 43959 FENNER AVE

City LANCASTER	State CA	Zip Code 93536-5808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RE/MAX ALL PRO	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388257

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3728 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENCE, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43959 FENNER AVE

City LANCASTER	State CA	Zip Code 93536-5808
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RE/MAX ALL PRO	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388258

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PENFIELD, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 ELRU DRIVE

City DAYTON	State OH	Zip Code 45415-1106
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTINGTON NATIONAL BANK	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422837

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PENFIELD, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 ELRU DRIVE

City DAYTON	State OH	Zip Code 45415-1106
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTINGTON NATIONAL BANK	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422840

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3729 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENFIELD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 ELRU DRIVE
 City DAYTON State OH Zip Code 45415-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTINGTON NATIONAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422863
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PENFIELD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 ELRU DRIVE
 City DAYTON State OH Zip Code 45415-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTINGTON NATIONAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422868
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PENFIELD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 ELRU DRIVE
 City DAYTON State OH Zip Code 45415-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTINGTON NATIONAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422888
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3730 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PENFIELD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7600 ELRU DRIVE
 City DAYTON State OH Zip Code 45415-1106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTINGTON NATIONAL BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422889
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PERBETSKY, HANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 TAHOE VISTA COURT
 City ROCKLIN State CA Zip Code 95765-5092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389789
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PERBETSKY, HANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 TAHOE VISTA COURT
 City ROCKLIN State CA Zip Code 95765-5092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397468
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3731 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERBETSKY, HANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 TAHOE VISTA COURT
 City ROCKLIN State CA Zip Code 95765-5092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407093
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PERENIC, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32450 SCOTTSDALE
 City FRANKLIN State MI Zip Code 48025-1039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARGENT TAPE AND LABEL Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411693
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PERENIC, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32450 SCOTTSDALE
 City FRANKLIN State MI Zip Code 48025-1039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARGENT TAPE AND LABEL Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411694
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3732 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEREZ, JOSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 HEATHER COURT

City SCHERERVILLE	State IN	Zip Code 46375-1008
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCELORMITTAL USA LLC	Occupation (for Individual) OPERATING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
517.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353860

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PEREZ, JOSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 HEATHER COURT

City SCHERERVILLE	State IN	Zip Code 46375-1008
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCELORMITTAL USA LLC	Occupation (for Individual) OPERATING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
517.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400923

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PEREZ, JOSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 HEATHER COURT

City SCHERERVILLE	State IN	Zip Code 46375-1008
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCELORMITTAL USA LLC	Occupation (for Individual) OPERATING TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
517.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417048

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3733 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEREZ, WILLIAM, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1320 N STATE PARKWAY
 City CHICAGO State IL Zip Code 60610-2455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367964
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. PERICA, ADRIAN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1725 OAKDELL DR
 City MENLO PARK State CA Zip Code 94025-5735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346082
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388517
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	27750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3734 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY
 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394178
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY
 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398132
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY
 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398190
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3735 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERKINS, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8580 WOODWAY
3304

City HOUSTON State TX Zip Code 77063-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
09 / 15 / 2016
Transaction ID : SA11A.398191

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PERKINS, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8580 WOODWAY
3304

City HOUSTON State TX Zip Code 77063-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
09 / 23 / 2016
Transaction ID : SA11A.405065

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. PERKINS, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8580 WOODWAY
3304

City HOUSTON State TX Zip Code 77063-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
09 / 26 / 2016
Transaction ID : SA11A.407592

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3736 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY
 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407615
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY
 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410545
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY
 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418293
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3737 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERKINS, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY
 3304
 City HOUSTON State TX Zip Code 77063-2423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418296
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PERROTTA, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5427 ROYAL MILE BLVD.
 City SALISBURY State MD Zip Code 21801-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VINCENT PERROTTA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410775
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PERRY, ADDIE, MITCHELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 865 OLD DALTON ROAD NE
 City ROME State GA Zip Code 30165-9096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.348024
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3738 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, ADDIE, MITCHELL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 865 OLD DALTON ROAD NE
City ROME State GA Zip Code 30165-9096
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366047
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PERRY, ADDIE, MITCHELL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 865 OLD DALTON ROAD NE
City ROME State GA Zip Code 30165-9096
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.367087
Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. PERRY, ADDIE, MITCHELL, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 865 OLD DALTON ROAD NE
City ROME State GA Zip Code 30165-9096
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400388
Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3739 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. PERRY, ADDIE, MITCHELL, ,		Date of Receipt
Mailing Address 865 OLD DALTON ROAD NE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2016"/>
City ROME	State GA	Zip Code 30165-9096
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.409575
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="345.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PERRY, CHRISTOPHER, , ,		Date of Receipt
Mailing Address 574 COTTAGE ROW		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City TAPPAHANNOCK	State VA	Zip Code 22560-4912
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.418947
Name of Employer (for Individual) VAMAC INC		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) PRESIDENT & CEO		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PERRY, DOUGLAS, , ,		Date of Receipt
Mailing Address 6404 HOSLER		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City LEO	State IN	Zip Code 46765-9760
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.385810
Name of Employer (for Individual) SELF EMPLOYED		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) SELF EMPLOYED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="785.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3740 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY-CABRERA, LINDA, H., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 330 BELLA VISTA AVE
City BELVEDERE TIBURON State CA Zip Code 94920-2417
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376512
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PERRY, MADELYN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1226 MADISON AVENUE
City WATERTOWN State NY Zip Code 13601-3816
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349948
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PERRY, MADELYN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1226 MADISON AVENUE
City WATERTOWN State NY Zip Code 13601-3816
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384203
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3741 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392255
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392256
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398117
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3742 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398120
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PERRY, MADELYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 MADISON AVENUE
 City WATERTOWN State NY Zip Code 13601-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416270
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3743 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 645

City MEDINA	State WA	Zip Code 98039-0645
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHOTGUN CREEK INVESTMENTS, LLC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356199

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. PERSICO, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 510 ROUND HILL ROAD

City GREENWICH	State CT	Zip Code 06831-2641
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.380953

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. PESCOSOLIDO, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2521 GOLFSIDE DRIVE

City NAPLES	State FL	Zip Code 34110-7001
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.377649

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3744 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PESCOSOLIDO, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2521 GOLFSIDE DRIVE

City NAPLES	State FL	Zip Code 34110-7001
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415055

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PESCOSOLIDO, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2521 GOLFSIDE DRIVE

City NAPLES	State FL	Zip Code 34110-7001
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415056

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PETERSON, ALAN, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 646 PLUMTREE ROAD

City GLEN ELLYN	State IL	Zip Code 60137-4235
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407137

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3745 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERY, ANDRAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HIGHLAND FARM ROAD
 City GREENWICH State CT Zip Code 06831-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348746
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PETERY, ANDRAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HIGHLAND FARM ROAD
 City GREENWICH State CT Zip Code 06831-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370394
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PETERY, ANDRAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HIGHLAND FARM ROAD
 City GREENWICH State CT Zip Code 06831-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391036
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3746 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERY, ANDRAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HIGHLAND FARM ROAD
 City GREENWICH State CT Zip Code 06831-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407746
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PETERY, ANDRAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HIGHLAND FARM ROAD
 City GREENWICH State CT Zip Code 06831-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407750
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PETERSON, BERVIN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 E RANDOLPH STREET
 2101
 City CHICAGO State IL Zip Code 60601-5069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETERSON & ASSOCIATES Occupation (for Individual) REAL ESTATE REDEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397786
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3747 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 129
 City LISBON State MD Zip Code 21765-0129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387716
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. PETERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 129
 City LISBON State MD Zip Code 21765-0129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403215
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PETERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 129
 City LISBON State MD Zip Code 21765-0129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403226
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3748 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 129
 City LISBON State MD Zip Code 21765-0129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403228
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PETERSON, BRUCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 S HIGH STREET
 City DENVER State CO Zip Code 80209-4551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIO GRANDE CO Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361375
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. PETERSON, BRUCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 S HIGH STREET
 City DENVER State CO Zip Code 80209-4551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIO GRANDE CO Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382264
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3749 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, CHARLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 N HYDE ST
 City ATKINSON State NE Zip Code 68713-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLEY W PETERSON Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381819
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PETERSON, CHARLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 N HYDE ST
 City ATKINSON State NE Zip Code 68713-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLEY W PETERSON Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398021
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETERSON, CHARLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 N HYDE ST
 City ATKINSON State NE Zip Code 68713-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLEY W PETERSON Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413374
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3750 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, CHARLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 N HYDE ST
 City ATKINSON State NE Zip Code 68713-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLEY W PETERSON Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413383
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PETERSON, CHARLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 N HYDE ST
 City ATKINSON State NE Zip Code 68713-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLEY W PETERSON Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419977
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PETERSON, DIANA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6033 S 2300 E
 City SALT LAKE CITY State UT Zip Code 84121-1439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.346453
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3751 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, DONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 MASSEY DR.
 City WESTERVILLE State OH Zip Code 43081-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387050
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PETERS, DONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 MASSEY DR.
 City WESTERVILLE State OH Zip Code 43081-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387051
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PETERS, DONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 MASSEY DR.
 City WESTERVILLE State OH Zip Code 43081-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416537
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3752 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, DONALD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 MASSEY DR.
 City WESTERVILLE State OH Zip Code 43081-1941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416543
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PETERS, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 SALEM CHURCH RD
 City SUNFISH LAKE State MN Zip Code 55118-4719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390464
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PETERSON, GREGORY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WOODSIDE LANE
 City WESTPORT State CT Zip Code 06880-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PWC Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364262
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3753 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6033 S 2300 E
 City SALT LAKE CITY State UT Zip Code 84121-1439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETERSON PARTNERS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.346452
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. PETERSON, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3701 GLASSENBERRY
 City KELLER State TX Zip Code 76244-8697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETERSON'S LANDSCAPE Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372591
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PETERSON, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3701 GLASSENBERRY
 City KELLER State TX Zip Code 76244-8697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETERSON'S LANDSCAPE Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417656
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3754 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4442 VEREDA LUNA LLENA
 City SAN DIEGO State CA Zip Code 92130-2666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348945
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4442 VEREDA LUNA LLENA
 City SAN DIEGO State CA Zip Code 92130-2666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352263
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4442 VEREDA LUNA LLENA
 City SAN DIEGO State CA Zip Code 92130-2666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362327
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3755 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358317
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368965
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.373225
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3756 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373227
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382485
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398724
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3757 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERMAN, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3815 N BROOKFIELD RD
 City BROOKFIELD State WI Zip Code 53045-1964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416159
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETERSEN, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4485 SW TRAIL ROAD
 City TUALATIN State OR Zip Code 97062-7782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387770
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PETERSEN, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4485 SW TRAIL ROAD
 City TUALATIN State OR Zip Code 97062-7782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410369
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3758 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSEN, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4342 BOBWHITE CT
 City OGDEN State UT Zip Code 84403-3262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390227
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PETERSON, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 50TH STREET NW
 City WASHINGTON State DC Zip Code 20016-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365777
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PETERSON, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 50TH STREET NW
 City WASHINGTON State DC Zip Code 20016-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374218
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3759 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 50TH STREET NW
 City WASHINGTON State DC Zip Code 20016-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387476
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PETERSON, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 50TH STREET NW
 City WASHINGTON State DC Zip Code 20016-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394184
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PETERSON, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 50TH STREET NW
 City WASHINGTON State DC Zip Code 20016-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407568
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3760 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6790 E GEDDES LN
 City CENTENNIAL State CO Zip Code 80112-1573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390305
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PETERSON, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8201 164TH AVE NE SUITE 200
 200
 City REDMOND State WA Zip Code 98052-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360198
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PETERSON, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8201 164TH AVE NE SUITE 200
 200
 City REDMOND State WA Zip Code 98052-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360199
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3761 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8201 164TH AVE NE SUITE 200
 200
 City REDMOND State WA Zip Code 98052-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.378977
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PETERSON, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8201 164TH AVE NE SUITE 200
 200
 City REDMOND State WA Zip Code 98052-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 24 / 2016
Transaction ID : SA11A.378978
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETERSON, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8201 164TH AVE NE SUITE 200
 200
 City REDMOND State WA Zip Code 98052-7615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386927
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3762 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PETERSON, RALPH, , ,

Mailing Address **PO BOX 2073**

City LA MESA	State CA	Zip Code 91943-2073
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 14 / 2016

Transaction ID : SA11A.395058

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PETERSEN, THOMAS, , ,

Mailing Address **8030 PEBBLE CREEK LANE W**

City PONTE VEDRA BEACH	State FL	Zip Code 32082-3102
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
09 / 13 / 2016

Transaction ID : SA11A.394209

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PETERSEN, THOMAS, , ,

Mailing Address **8030 PEBBLE CREEK LANE W**

City PONTE VEDRA BEACH	State FL	Zip Code 32082-3102
----------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
09 / 26 / 2016

Transaction ID : SA11A.407829

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3763 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETERSON, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3412 CHATSWORTH LANE
 City ORLANDO State FL Zip Code 32812-6032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RISSMAN, BARRET, ET.AL ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.369160
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PETERSON, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 FAIR LAKES CIR STE 400
 City FAIRFAX State VA Zip Code 22033-3804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421200
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. PETHERICK, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56767 MT. VERNON
 City SHELBY TOWNSHIP State MI Zip Code 48316-4827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NORTHPOINTE CAPITAL INVESTMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388360
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3764 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETHERICK, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56767 MT. VERNON

City SHELBY TOWNSHIP	State MI	Zip Code 48316-4827
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHPOINTE CAPITAL	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419297

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. PETRIELLO, LOUIS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 TOWNSHIP LINE ROAD SUITE 200

City BLUE BELL	State PA	Zip Code 19422-2738
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358050

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PETRIELLO, LOUIS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 TOWNSHIP LINE ROAD SUITE 200

City BLUE BELL	State PA	Zip Code 19422-2738
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366726

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3765 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETRIELLO, LOUIS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 526 TOWNSHIP LINE ROAD
SUITE 200

City BLUE BELL State PA Zip Code 19422-2738

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368123

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. PETRIELLO, LOUIS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 526 TOWNSHIP LINE ROAD
SUITE 200

City BLUE BELL State PA Zip Code 19422-2738

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378400

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. PETRIELLO, LOUIS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 526 TOWNSHIP LINE ROAD
SUITE 200

City BLUE BELL State PA Zip Code 19422-2738

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399542

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3766 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETRIELLO, LOUIS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 526 TOWNSHIP LINE ROAD
SUITE 200

City BLUE BELL State PA Zip Code 19422-2738

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.413981

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. PETRIELLO, LOUIS, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 526 TOWNSHIP LINE ROAD
SUITE 200

City BLUE BELL State PA Zip Code 19422-2738

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.414638

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PETRICH, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 178 JERICHO VALLEY DRIVE

City NEWTOWN State PA Zip Code 18940-3632

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11A.358507

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3767 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETRICH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 JERICHO VALLEY DRIVE
 City NEWTOWN State PA Zip Code 18940-3632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.378588
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PETRONE, AUGUSTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1037
 City DUBLIN State NH Zip Code 03444-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352053
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PETRONE, AUGUSTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1037
 City DUBLIN State NH Zip Code 03444-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352528
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3768 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PETRONE, AUGUSTA, , ,

Mailing Address **PO BOX 1037**

City **DUBLIN** State **NH** Zip Code **03444-1037**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11A.398931

Amount of Each Receipt this Period
115.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. PETTIS, CHARLES, , ,

Mailing Address **6411 E MIRAMAR DRIVE**

City **TUCSON** State **AZ** Zip Code **85715-3118**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 09 / 2016

Transaction ID : SA11A.362781

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. PETTY, SCOTT, , MR., JR.

Mailing Address **202 LA JARA BOULEVARD**

City **SAN ANTONIO** State **TX** Zip Code **78209-4444**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 21 / 2016

Transaction ID : SA11A.352537

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **2115.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3769 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PEZZANO MICKEY, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 ROSEBERRY ST.
 City PHILLIPSBURG State NJ Zip Code 08865-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEZZANO MICKEY & BORNSTEIN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366632
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PEZZIMENTI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3931 HEATHERBROOK TRL.
 City VALE State NC Zip Code 28168-9571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TD BANK Occupation (for Individual) VP QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374415
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PEZZIMENTI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3931 HEATHERBROOK TRL.
 City VALE State NC Zip Code 28168-9571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TD BANK Occupation (for Individual) VP QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418954
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3770 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PEZZIMENTI, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3931 HEATHERBROOK TRL.

City VALE	State NC	Zip Code 28168-9571
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TD BANK	Occupation (for Individual) VP QUALITY ASSURANCE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418997

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PFABE, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6586 SERENITY LOOP

City GIG HARBOR	State WA	Zip Code 98335-5504
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED GRINDING & MACH	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350576

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. PFABE, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6586 SERENITY LOOP

City GIG HARBOR	State WA	Zip Code 98335-5504
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED GRINDING & MACH	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359433

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3771 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFABE, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6586 SERENITY LOOP
 City GIG HARBOR State WA Zip Code 98335-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED GRINDING & MACH Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.362944
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PFABE, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6586 SERENITY LOOP
 City GIG HARBOR State WA Zip Code 98335-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED GRINDING & MACH Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394231
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PFAUTCH, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 PORTLAND PL
 City ST LOUIS State MO Zip Code 63108-1242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIVIC SERVICES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354435
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3772 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFEIFER, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 561 MONTEREY TRAIL
City DAKOTA DUNES State SD Zip Code 57049-5284
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372504
Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. PFEIFER, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 561 MONTEREY TRAIL
City DAKOTA DUNES State SD Zip Code 57049-5284
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.398417
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PFEIL, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 24TH ST NW
City AUSTIN State MN Zip Code 55912-9554
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386627
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3773 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFEIL, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 24TH ST NW
 City AUSTIN State MN Zip Code 55912-9554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415943
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PFISTER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3987 SOUTHWOODS DRIVE
 City HOWELL State MI Zip Code 48843-9406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 02 / 2016
Transaction ID : SA11A.344275
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PFISTER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3987 SOUTHWOODS DRIVE
 City HOWELL State MI Zip Code 48843-9406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365651
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3774 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFISTER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3987 SOUTHWOODS DRIVE
 City HOWELL State MI Zip Code 48843-9406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365652
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PFISTER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 HIDEAWAY DR
 City KENTON State OH Zip Code 43326-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350404
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PFISTER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 HIDEAWAY DR
 City KENTON State OH Zip Code 43326-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397768
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3775 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFISTER, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397772

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. PFISTER, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405163

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PFISTER, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407737

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3776 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFISTER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 HIDEAWAY DR
 City KENTON State OH Zip Code 43326-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410418
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PFISTER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 HIDEAWAY DR
 City KENTON State OH Zip Code 43326-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412438
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PFISTER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 HIDEAWAY DR
 City KENTON State OH Zip Code 43326-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413994
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3777 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PFISTER, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 HIDEAWAY DR

City KENTON	State OH	Zip Code 43326-2606
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Transaction ID : SA11A.418962

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PFLUGRATH, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1819 GROVE AVE

City RICHMOND	State VA	Zip Code 23220-4505
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2016

Transaction ID : SA11A.354702

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PFLUGRATH, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1819 GROVE AVE

City RICHMOND	State VA	Zip Code 23220-4505
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2016

Transaction ID : SA11A.362478

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3778 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHAIR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAN BENITO WAY
 City SAN FRANCISCO State CA Zip Code 94127-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414821
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PHAIR, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 SAN BENITO WAY
 City SAN FRANCISCO State CA Zip Code 94127-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414823
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PHARES, WOOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6559 OAKLAND HILLS DRIVE
 City BRADENTON State FL Zip Code 34202-2522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.366542
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3779 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352370
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.354047
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356281
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3780 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358950
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358951
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 08 / 07 / 2016
Transaction ID : SA11A.363275
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3781 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375939
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379746
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379748
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3782 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383028
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391006
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401525
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3783 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHELPS, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 RIM CANYON PKWY
 City OROVILLE State CA Zip Code 95966-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 596.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411293
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PHIFER, BROOK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 W CANAL CT 3000
 City LITTLETON State CO Zip Code 80120-5642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANS MOUNTAIN CORP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394367
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. PHILLIPS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9185 NE SALMON RUN LANE
 City BAINBRIDGE ISLAND State WA Zip Code 98110-3412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394744
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 825.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3784 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 FOREST AVENUE
 City NEW ROCHELLE State NY Zip Code 10804-4205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353616
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PHILLIPS, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 FOREST AVENUE
 City NEW ROCHELLE State NY Zip Code 10804-4205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382633
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PHILLIPS, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 FOREST AVENUE
 City NEW ROCHELLE State NY Zip Code 10804-4205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400724
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3785 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8795 HIGHWAY 54
 City PARIS State TN Zip Code 38242-6403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377134
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. PHILLIPS, G., G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 904 OLD CAMP ROAD
 City MILLBORO State VA Zip Code 24460-2593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392662
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PHILLIPS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23626 GENESEE VILLAGE RD
 City GOLDEN State CO Zip Code 80401-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368842
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3786 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23626 GENESEE VILLAGE RD

City GOLDEN	State CO	Zip Code 80401-7044
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SA11A.368864

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PHILLIPS, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15025 SW 137TH PL

City TIGARD	State OR	Zip Code 97224-1542
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACIFIC WEST COMMUNICATIONS	Occupation (for Individual) PUBLIC RELATIONS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.367888

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. PHILLIPS, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2239 NW 3RD TERRACE

City CAPE CORAL	State FL	Zip Code 33993-7531
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2016

Transaction ID : SA11A.391906

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3787 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2239 NW 3RD TERRACE
 City CAPE CORAL State FL Zip Code 33993-7531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410322
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PHIPPS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 MAIN ST
 City WAKEFIELD State MA Zip Code 01880-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369051
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PHIPPS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 MAIN ST
 City WAKEFIELD State MA Zip Code 01880-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369053
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3788 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICKENS, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 NW 58TH STREET
 City GAINESVILLE State FL Zip Code 32607-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 17 / 2016**
Transaction ID : SA11A.400287
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PICKENS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 GOUGH ST 205
 City SAN FRANCISCO State CA Zip Code 94109-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G2 INSURANCE SERVICES Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 06 / 2016**
Transaction ID : SA11A.345991
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. PICKENS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 GOUGH ST 205
 City SAN FRANCISCO State CA Zip Code 94109-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G2 INSURANCE SERVICES Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3789 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PICKENS, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 GOUGH ST
205

City SAN FRANCISCO State CA Zip Code 94109-4452

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) G2 INSURANCE SERVICES Occupation (for Individual) INSURANCE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.383965

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PICKENS, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 GOUGH ST
205

City SAN FRANCISCO State CA Zip Code 94109-4452

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) G2 INSURANCE SERVICES Occupation (for Individual) INSURANCE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.410132

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. PICKENS, W, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8111 PRESTON ROAD
STE. 800

City DALLAS State TX Zip Code 75225-6316

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE PICKENS COMPANY, INC. Occupation (for Individual) PETROLEUM LANDMAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.402457

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3790 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIDUTTI, JOSEPH, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 PETERSON DRIVE
 City SILVER CITY State NM Zip Code 88061-8871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358091
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PIDUTTI, JOSEPH, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 PETERSON DRIVE
 City SILVER CITY State NM Zip Code 88061-8871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414031
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. PIEPER, RICHARD, R., MR., SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11602 N. SHORECLIFF
 City MEQUON State WI Zip Code 53092-3528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398458
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 25200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3791 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PIEPHO, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1778 DANFORTH COURT
 City MARIETTA State GA Zip Code 30062-5543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417138
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. PIERCE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BATTERY POINT DRIVE
 City FREDERICKSBURG State VA Zip Code 22406-5471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STSLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359299
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PIERCE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BATTERY POINT DRIVE
 City FREDERICKSBURG State VA Zip Code 22406-5471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STSLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368672
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3792 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERCE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BATTERY POINT DRIVE
 City FREDERICKSBURG State VA Zip Code 22406-5471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STSLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387276
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PIERCE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BATTERY POINT DRIVE
 City FREDERICKSBURG State VA Zip Code 22406-5471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STSLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.393806
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. PIERCE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BATTERY POINT DRIVE
 City FREDERICKSBURG State VA Zip Code 22406-5471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STSLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413883
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3793 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERCE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BATTERY POINT DRIVE
 City FREDERICKSBURG State VA Zip Code 22406-5471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STSLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422288
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. PIERCE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 WORPLESDON
 City WILLIAMSBURG State VA Zip Code 23188-7449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389657
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PIERCE, RONALD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33751 BLESSINGTON LN
 City SAN JUAN CAPISTRAN State CA Zip Code 92675-4958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350134
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3794 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERRON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30765 OVERLOOK RUN
 City BUENA VISTA State CO Zip Code 81211-9836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350158
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PIERRON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30765 OVERLOOK RUN
 City BUENA VISTA State CO Zip Code 81211-9836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366882
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PIERRON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30765 OVERLOOK RUN
 City BUENA VISTA State CO Zip Code 81211-9836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384464
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3795 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIERRON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30765 OVERLOOK RUN
 City BUENA VISTA State CO Zip Code 81211-9836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390189
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PIERRON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30765 OVERLOOK RUN
 City BUENA VISTA State CO Zip Code 81211-9836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408521
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PIERSON, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 LOEFFLER ROAD APT T519
 City BLOOMFIELD State CT Zip Code 06002-2273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366009
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3796 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIETRINI, FRANCIS, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 E CHURCH RD
 City KING OF PRUSSIA State PA Zip Code 19406-2602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B. PIETRINI & SONS Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11A.346085
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PIETSCH, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 TIMBERLINE RD
 City TEMPLE State TX Zip Code 76502-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403465
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PIETSCH, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 TIMBERLINE RD
 City TEMPLE State TX Zip Code 76502-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403483
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3797 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIGHINI, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 427 MILITIA HILL ROAD

City FORT WASHINGTON	State PA	Zip Code 19034-1905
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMCAST CABLE	Occupation (for Individual) SVP AND CABLE CONTROLLER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11A.402675

Amount of Each Receipt this Period
1250.00

Memo Item CONTRIBUTION

B. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11A.391039

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : SA11A.391040

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3798 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391876

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394269

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394271

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3799 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410707

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413394

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. PIGNOTTI, JOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 SOUTH YACHTSMAN DR

City SANIBEL	State FL	Zip Code 33957-5013
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413397

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3800 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIGNOTTI, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 SOUTH YACHTSMAN DR
 City SANIBEL State FL Zip Code 33957-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422121
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PIGOTT, CHARLES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 106TH AVENUE NE
 City BELLEVUE State WA Zip Code 98004-5027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 33000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.356845
 Amount of Each Receipt this Period 33000.00
 Memo Item CONTRIBUTION

C. PILKINGTON, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 S SECOND ST
 City STERLING State CO Zip Code 80751-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366562
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 33125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3801 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PILLOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8160 SILK CIRCLE
 City INDIANAPOLIS State IN Zip Code 46256-4344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PILLOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8160 SILK CIRCLE
 City INDIANAPOLIS State IN Zip Code 46256-4344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390700
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PILLOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8160 SILK CIRCLE
 City INDIANAPOLIS State IN Zip Code 46256-4344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399435
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3802 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PILLOW, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8160 SILK CIRCLE

City INDIANAPOLIS	State IN	Zip Code 46256-4344
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412163

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PINCKARD, CLIFTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24117 SOUTH LINDSAY ROAD

City CHANDLER	State AZ	Zip Code 85249-9511
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374448

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PINCKARD, CLIFTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24117 SOUTH LINDSAY ROAD

City CHANDLER	State AZ	Zip Code 85249-9511
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404868

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3803 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PINCKARD, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24117 SOUTH LINDSAY ROAD
 City CHANDLER State AZ Zip Code 85249-9511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422333
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PINEDA, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1145 PARKSTONE DR.
 City DRAPER State UT Zip Code 84020-8305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386447
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. PINEDA, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1145 PARKSTONE DR.
 City DRAPER State UT Zip Code 84020-8305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386448
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3804 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PINKERTON, JERRY, , ,

Mailing Address 2848 WOODSIDE ST
APT. 401

City DALLAS State TX Zip Code 75204-2572

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
688.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016

Transaction ID : SA11A.349921

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PINKERTON, JERRY, , ,

Mailing Address 2848 WOODSIDE ST
APT. 401

City DALLAS State TX Zip Code 75204-2572

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
688.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : SA11A.357577

Amount of Each Receipt this Period
147.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PINKERTON, JERRY, , ,

Mailing Address 2848 WOODSIDE ST
APT. 401

City DALLAS State TX Zip Code 75204-2572

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
688.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016

Transaction ID : SA11A.382756

Amount of Each Receipt this Period
147.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 394.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3805 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PINKERTON, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2848 WOODSIDE ST
 APT. 401
 City DALLAS State TX Zip Code 75204-2572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 688.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413101
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

B. PINKERTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BLUEBILL AVE #805
 #805
 City NAPLES State FL Zip Code 34108-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357363
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PINKERTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BLUEBILL AVE #805
 #805
 City NAPLES State FL Zip Code 34108-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378942
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2147.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3806 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PINKERTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BLUEBILL AVE #805
 #805
 City NAPLES State FL Zip Code 34108-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.385183
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. PINKERTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BLUEBILL AVE #805
 #805
 City NAPLES State FL Zip Code 34108-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412996
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. PIPER, WALTER, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 RANGE RD
 City CLEARWATER State FL Zip Code 33765-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347362
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3807 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIPER, WALTER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 RANGE RD
 City CLEARWATER State FL Zip Code 33765-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412956
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PIPER, WALTER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 RANGE RD
 City CLEARWATER State FL Zip Code 33765-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415576
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PIRELA, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5820 NE 21ST RD
 City FORT LAUDERDALE State FL Zip Code 33308-2564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXECUTIVE AIR SERVICES Occupation (for Individual) CORPORATE PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349436
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3808 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIRELA, PEDRO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5820 NE 21ST RD

City FORT LAUDERDALE	State FL	Zip Code 33308-2564
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXECUTIVE AIR SERVICES	Occupation (for Individual) CORPORATE PILOT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374676

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. PIRELA, PEDRO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5820 NE 21ST RD

City FORT LAUDERDALE	State FL	Zip Code 33308-2564
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXECUTIVE AIR SERVICES	Occupation (for Individual) CORPORATE PILOT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378953

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PIRELA, PEDRO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5820 NE 21ST RD

City FORT LAUDERDALE	State FL	Zip Code 33308-2564
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXECUTIVE AIR SERVICES	Occupation (for Individual) CORPORATE PILOT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399712

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3809 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIRELA, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5820 NE 21ST RD
 City FORT LAUDERDALE State FL Zip Code 33308-2564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXECUTIVE AIR SERVICES Occupation (for Individual) CORPORATE PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410634
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PIRELA, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5820 NE 21ST RD
 City FORT LAUDERDALE State FL Zip Code 33308-2564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXECUTIVE AIR SERVICES Occupation (for Individual) CORPORATE PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410638
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PIRNIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 S STUHR RD
 City GRAND ISLAND State NE Zip Code 68801-8569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRAND ISLAND EXPRESS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407860
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3810 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIRNIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 S STUHR RD
 City GRAND ISLAND State NE Zip Code 68801-8569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRAND ISLAND EXPRESS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410905
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. PISANO, JEANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 STANFORD DRIVE
 City NASHVILLE State TN Zip Code 37215-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382543
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PISANO, JEANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 STANFORD DRIVE
 City NASHVILLE State TN Zip Code 37215-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391717
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3811 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PISANO, JEANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 STANFORD DRIVE
 City NASHVILLE State TN Zip Code 37215-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409167
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PISANO, JEANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 STANFORD DRIVE
 City NASHVILLE State TN Zip Code 37215-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409168
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PISANO, JEANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 STANFORD DRIVE
 City NASHVILLE State TN Zip Code 37215-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410456
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3812 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PISANO, JEANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 STANFORD DRIVE
 City NASHVILLE State TN Zip Code 37215-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422418
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PISANO, JEANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 STANFORD DRIVE
 City NASHVILLE State TN Zip Code 37215-4230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422419
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PITSCH, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 GOULDMAN LANE
 City GREAT FALLS State VA Zip Code 22066-2936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEL CORP. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369112
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3813 OF 5722
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PITSCH, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 705 GOULDMAN LANE

City GREAT FALLS	State VA	Zip Code 22066-2936
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTEL CORP.	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2016

Transaction ID : SA11A.398721

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. PITTS, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 STELLA ST

City LEBANON	State MO	Zip Code 65536-4259
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELTER INSURANCE COMPANIES	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2016

Transaction ID : SA11A.394276

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. PITTS, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 STELLA ST

City LEBANON	State MO	Zip Code 65536-4259
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELTER INSURANCE COMPANIES	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.403182

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3814 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PITTS, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 STELLA ST

City LEBANON	State MO	Zip Code 65536-4259
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELTER INSURANCE COMPANIES	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403201

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PITTS, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 STELLA ST

City LEBANON	State MO	Zip Code 65536-4259
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELTER INSURANCE COMPANIES	Occupation (for Individual) INSURANCE AGENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403211

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. PIXLEY, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 488 RIVER CLIFF DRIVE

City CANYON LAKE	State TX	Zip Code 78133-4545
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2016

Transaction ID : SA11A.346655

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3815 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIXLEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 RIVER CLIFF DRIVE
 City CANYON LAKE State TX Zip Code 78133-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363906
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PIXLEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 RIVER CLIFF DRIVE
 City CANYON LAKE State TX Zip Code 78133-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372841
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. PIXLEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 RIVER CLIFF DRIVE
 City CANYON LAKE State TX Zip Code 78133-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 118.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3816 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PIXLEY, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 488 RIVER CLIFF DRIVE
 City CANYON LAKE State TX Zip Code 78133-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392125
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PLACE, KATHARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 POND LANE
 City BRYN MAWR State PA Zip Code 19010-1772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387599
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PLANK, RAYMOND, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 APACHE ROAD
 City CLEARMONT State WY Zip Code 82835-9703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361238
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3817 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PLASTER, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4306 E 118TH STREET
 City TULSA State OK Zip Code 74137-8304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTERN OK ORTHOPEDIC Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376465
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. PLATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 OLD JACKSON AVE 15
 City HASTINGS ON HUDSON State NY Zip Code 10706-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418761
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PLATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 OLD JACKSON AVE 15
 City HASTINGS ON HUDSON State NY Zip Code 10706-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418801
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3818 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PLAUCHE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2805 W WASHINGTON ST
 City SHERMAN State TX Zip Code 75092-5409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RGB EYE ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403722
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PLAUCHE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2805 W WASHINGTON ST
 City SHERMAN State TX Zip Code 75092-5409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RGB EYE ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403725
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PLAYTIS, ANN, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 ETON CT
 City WASHINGTON State WV Zip Code 26181-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354230
 Amount of Each Receipt this Period 110.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3819 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PLAYTIS, ANN, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 ETON CT
 City WASHINGTON State WV Zip Code 26181-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381217
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PLAYTIS, ANN, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 ETON CT
 City WASHINGTON State WV Zip Code 26181-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.406496
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

C. PLAYTIS, ANN, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 ETON CT
 City WASHINGTON State WV Zip Code 26181-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.408138
 Amount of Each Receipt this Period
 120.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3820 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PLOTNER, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4507 BIMINI DRIVE
 City BRADENTON State FL Zip Code 34210-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 02 / 2016
Transaction ID : SA11A.358899
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. PLOTNER, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4507 BIMINI DRIVE
 City BRADENTON State FL Zip Code 34210-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.373918
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PLOTNER, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4507 BIMINI DRIVE
 City BRADENTON State FL Zip Code 34210-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393842
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3821 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PODESTA, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 LAUREL COURT
 City SYOSSET State NY Zip Code 11791-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380925
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. POGELER, CHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 279 COU
 City ENCINITAS State CA Zip Code 92024-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YMCA Occupation (for Individual) FITNESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355496
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POGELER, CHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 279 COU
 City ENCINITAS State CA Zip Code 92024-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YMCA Occupation (for Individual) FITNESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380760
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3822 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POGELER, CHERI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 279 COU

City ENCINITAS	State CA	Zip Code 92024-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) YMCA	Occupation (for Individual) FITNESS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401303

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. POGELER, CHERI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 279 COU

City ENCINITAS	State CA	Zip Code 92024-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) YMCA	Occupation (for Individual) FITNESS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407951

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. POGELER, CHERI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 279 COU

City ENCINITAS	State CA	Zip Code 92024-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) YMCA	Occupation (for Individual) FITNESS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414861

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3823 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POGODZINSKI, ANTHONY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 MANITOU PK DR
 City MINOCQUA State WI Zip Code 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351997
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POGODZINSKI, ANTHONY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 MANITOU PK DR
 City MINOCQUA State WI Zip Code 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360233
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POGODZINSKI, ANTHONY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 MANITOU PK DR
 City MINOCQUA State WI Zip Code 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3824 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POGODZINSKI, ANTHONY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 MANITOU PK DR
 City MINOCQUA State WI Zip Code 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391776
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POGODZINSKI, ANTHONY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 MANITOU PK DR
 City MINOCQUA State WI Zip Code 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403403
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POHL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 ROCKVIEW DRIVE NE
 City ROCKFORD State MI Zip Code 49341-9167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401680
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3825 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POHLE, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POBOX 9569
 City BRECKENRIDGE State CO Zip Code 80424-9013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348641
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. POHLE, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POBOX 9569
 City BRECKENRIDGE State CO Zip Code 80424-9013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348650
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. POHLE, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POBOX 9569
 City BRECKENRIDGE State CO Zip Code 80424-9013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372718
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3826 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POHLE, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address POBOX 9569

City BRECKENRIDGE	State CO	Zip Code 80424-9013
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386728

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. POHLE, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address POBOX 9569

City BRECKENRIDGE	State CO	Zip Code 80424-9013
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386733

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. POHLE, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address POBOX 9569

City BRECKENRIDGE	State CO	Zip Code 80424-9013
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386738

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3827 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POHLE, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **POBOX 9569**
 City **BRECKENRIDGE** State **CO** Zip Code **80424-9013**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.386739
 Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

B. POHLE, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **POBOX 9569**
 City **BRECKENRIDGE** State **CO** Zip Code **80424-9013**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
09 / 18 / 2016
Transaction ID : SA11A.399923
 Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

C. POINTER, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **2510 TEXAS STREET**
 City **PERRYTON** State **TX** Zip Code **79070-5848**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.373517
 Amount of Each Receipt this Period
500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **700.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3828 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POJANOWSKI, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 INDIAN FIELD COURT
 City MAHWAH State NJ Zip Code 07430-2243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388873
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DRIVE
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350618
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DRIVE
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354166
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3829 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DRIVE
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 07 / 2016
Transaction ID : SA11A.363270
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DRIVE
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366472
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DRIVE
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374410
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3830 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POKORNY, GEROLD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 E BUENA VISTA DRIVE

City TEMPE	State AZ	Zip Code 85284-2402
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.374759

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. POKORNY, GEROLD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 E BUENA VISTA DRIVE

City TEMPE	State AZ	Zip Code 85284-2402
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2016

Transaction ID : SA11A.390817

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. POLEY, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3104 MONTICELLO DR.

City RALEIGH	State NC	Zip Code 27612-2139
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARKER POE ADAMS & BERNSTEIN LLP	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.352756

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3831 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POLKINGHORN, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 BROOKWOOD ROAD
 City MISSION HILLS State KS Zip Code 66208-1226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICO Occupation (for Individual) ACTUARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400718
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POLLACK, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 702 SOUND VIEW ROAD
 City OYSTER BAY State NY Zip Code 11771-1114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364395
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. POLLAN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 S. 40TH ST.
 City FORT SMITH State AR Zip Code 72903-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368647
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3832 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POLLAN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 S. 40TH ST.
 City FORT SMITH State AR Zip Code 72903-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396702
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. POLLAN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 S. 40TH ST.
 City FORT SMITH State AR Zip Code 72903-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402838
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POLLAN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 S. 40TH ST.
 City FORT SMITH State AR Zip Code 72903-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402856
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3833 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POLLARD, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 398 SHERWOOD DRIVE

City CAROL STREAM	State IL	Zip Code 60188-2207
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.365908

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. POLLARD, DICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3301 S LOOP 289

City LUBBOCK	State TX	Zip Code 79423-1321
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392584

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. POLLEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O.BOX 798

City TWIN HARTE	State CA	Zip Code 95383-0798
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362175

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3834 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POLLEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.BOX 798

City TWIN HARTE	State CA	Zip Code 95383-0798
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2016

Transaction ID : SA11A.380574

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. POLLEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.BOX 798

City TWIN HARTE	State CA	Zip Code 95383-0798
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2016

Transaction ID : SA11A.391727

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. POLLNOW, CHARLES, F., , IV
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 416 RANDOLPH AVE

City SEATTLE	State WA	Zip Code 98122-6450
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOWLE HILL MANAGEMENT	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.367881

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3835 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POLLOCK, RAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1075 OLD HARRISBURG ROAD UNIT 158

City GETTYSBURG	State PA	Zip Code 17325-3131
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016
Transaction ID : SA11A.377756

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. PONGETTI, J VICTOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5012 NORTHERN TRAIL NW

City ALBUQUERQUE	State NM	Zip Code 87120-2026
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016
Transaction ID : SA11A.366056

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. PONTIUS, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5707 COUNTY ROAD 31

City AUBURN	State IN	Zip Code 46706-9675
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BES
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2016
Transaction ID : SA11A.351893

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3836 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. POOL, PHILIP, B., MR., JR.		Date of Receipt MM / DD / YYYY 08 / 26 / 2016 Transaction ID : SA11A.380677
Mailing Address 8 EYRE LANE		Amount of Each Receipt this Period 250.00
City LOCUST VALLEY	State NY	Zip Code 11560-2202
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. POOL, PHILIP, B., MR., JR.		Date of Receipt MM / DD / YYYY 09 / 26 / 2016 Transaction ID : SA11A.407413
Mailing Address 8 EYRE LANE		Amount of Each Receipt this Period 100.00
City LOCUST VALLEY	State NY	Zip Code 11560-2202
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. POOLE, MICHELE, , ,		Date of Receipt MM / DD / YYYY 07 / 22 / 2016 Transaction ID : SA11A.354810
Mailing Address 4200 STATE ROAD 7		Amount of Each Receipt this Period 100.00
City WELLINGTON	State FL	Zip Code 33449-8103
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NORTH RIDGE ELECTRIC INC	Occupation (for Individual) OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3837 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POOLE, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 STATE ROAD 7
 City WELLINGTON State FL Zip Code 33449-8103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH RIDGE ELECTRIC INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375699
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POOLE, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 STATE ROAD 7
 City WELLINGTON State FL Zip Code 33449-8103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH RIDGE ELECTRIC INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404179
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POOLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 W TROPICAL WAY
 City PLANTATION State FL Zip Code 33317-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REASON FOUNDATION Occupation (for Individual) POLICY RESEARCH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365921
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3838 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POOLE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 140 W TROPICAL WAY
City PLANTATION State FL Zip Code 33317-3325
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) REASON FOUNDATION Occupation (for Individual) POLICY RESEARCH
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392900
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. POOLE, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15931 ROSETO WAY
City NAPLES State FL Zip Code 34110-2704
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353821
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POOLE, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15931 ROSETO WAY
City NAPLES State FL Zip Code 34110-2704
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383168
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3839 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POOLE, SHARON, , ,

Mailing Address **15931 ROSETO WAY**

City **NAPLES** State **FL** Zip Code **34110-2704**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.383171

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POOLE, SHARON, , ,

Mailing Address **15931 ROSETO WAY**

City **NAPLES** State **FL** Zip Code **34110-2704**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
09 / 20 / 2016

Transaction ID : SA11A.400698

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POOLE, SHARON, , ,

Mailing Address **15931 ROSETO WAY**

City **NAPLES** State **FL** Zip Code **34110-2704**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
09 / 20 / 2016

Transaction ID : SA11A.400699

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **450.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3840 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POOLE, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15931 ROSETO WAY
City NAPLES State FL Zip Code 34110-2704
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408207
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. POOLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8054 N VIA PALMA
City SCOTTSDALE State AZ Zip Code 85258-2869
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 382.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348829
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POOLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8054 N VIA PALMA
City SCOTTSDALE State AZ Zip Code 85258-2869
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 382.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366704
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3841 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POOLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8054 N VIA PALMA

City SCOTTSDALE	State AZ	Zip Code 85258-2869
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 382.00

Date of Receipt
08 / 18 / 2016
Transaction ID : SA11A.372737

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. POOLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8054 N VIA PALMA

City SCOTTSDALE	State AZ	Zip Code 85258-2869
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 382.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.386310

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. POOLE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8054 N VIA PALMA

City SCOTTSDALE	State AZ	Zip Code 85258-2869
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 382.00

Date of Receipt
09 / 14 / 2016
Transaction ID : SA11A.396832

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3842 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POOS, M., E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2107 TWIN SILO DRIVE
 City BLUE BELL State PA Zip Code 19422-3277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358676
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. POPE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5509 BENTGREEN DR
 City DALLAS State TX Zip Code 75248-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403312
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. PORTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4184 ISLANDER WAY
 City ANSCORTES State WA Zip Code 98221-8517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347486
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3843 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PORTER, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4184 ISLANDER WAY

City ANSCORTES	State WA	Zip Code 98221-8517
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348777

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PORTER, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4184 ISLANDER WAY

City ANSCORTES	State WA	Zip Code 98221-8517
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380537

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PORTER, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4184 ISLANDER WAY

City ANSCORTES	State WA	Zip Code 98221-8517
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.396763

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3844 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PORTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4184 ISLANDER WAY
 City ANSCORTES State WA Zip Code 98221-8517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402362
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PORTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4184 ISLANDER WAY
 City ANSCORTES State WA Zip Code 98221-8517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408161
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PORTER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 MCFARLIN BLVD.
 City DALLAS State TX Zip Code 75205-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 03 / 2016
Transaction ID : SA11A.344228
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3845 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PORTER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 MCFARLIN BLVD.
 City DALLAS State TX Zip Code 75205-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387334
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. PORTER, RICHMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SOUTH BEACH DRIVE
 City SAINT AUGUSTINE State FL Zip Code 32084-0459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386762
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PORTER, RICHMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SOUTH BEACH DRIVE
 City SAINT AUGUSTINE State FL Zip Code 32084-0459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403675
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 3846 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PORTER, RICHMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SOUTH BEACH DRIVE
 City SAINT AUGUSTINE State FL Zip Code 32084-0459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410214
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PORTMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18106 LAGOS WAY
 City NAPLES State FL Zip Code 34110-2762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390796
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. PORTMAN, WILLIAM, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 30816
 City SEA ISLAND State GA Zip Code 31561-0816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351145
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3847 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. POST, LAWRENCE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1160 TOWER ROAD
 City BEVERLY HILLS State CA Zip Code 90210-2131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POST ADVISORY GROUP Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376838
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350473
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2016
Transaction ID : SA11A.363352
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3848 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365142
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376109
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387283
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3849 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391323
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391324
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400849
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3850 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POST, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 DAWNWOOD DRIVE
 City PHILOMATH State OR Zip Code 97370-9091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408551
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POTARAZU, SREEDHAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10904 LAMPLIGHTER LANE
 City POTOMAC State MD Zip Code 20854-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VITAL SPRING Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.346478
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. POTTER, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 DEAN ST
 City ANNAPOLIS State MD Zip Code 21401-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365826
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3851 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POTTER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36334 43RD STREET EAST
 City PALMDALE State CA Zip Code 93552-6232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISACO COMPUTERS Occupation (for Individual) FIELD SERVICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354897
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POTTER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36334 43RD STREET EAST
 City PALMDALE State CA Zip Code 93552-6232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISACO COMPUTERS Occupation (for Individual) FIELD SERVICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382017
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

C. POTTER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36334 43RD STREET EAST
 City PALMDALE State CA Zip Code 93552-6232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LISACO COMPUTERS Occupation (for Individual) FIELD SERVICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382018
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 123.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3852 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POTTER, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36334 43RD STREET EAST

City PALMDALE	State CA	Zip Code 93552-6232
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LISACO COMPUTERS	Occupation (for Individual) FIELD SERVICE MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382020

Amount of Each Receipt this Period
18.00

Memo Item
CONTRIBUTION

B. POTTER, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36334 43RD STREET EAST

City PALMDALE	State CA	Zip Code 93552-6232
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LISACO COMPUTERS	Occupation (for Individual) FIELD SERVICE MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382024

Amount of Each Receipt this Period
101.00

Memo Item
CONTRIBUTION

C. POTTER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 MUIRFIELD LANE

City SAINT LOUIS	State MO	Zip Code 63141-7355
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394754

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	619.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3853 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POTTS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 262**
 City **CROWLEY** State **LA** Zip Code **70527-0262**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **JOHN MARSH FARM AND CANAL CO** Occupation (for Individual) **MANAGER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11A.400373
 Amount of Each Receipt this Period **250.00**
 Memo Item CONTRIBUTION

B. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **20 WASHINGTON ST. 241**
 City **BRIGHTON** State **MA** Zip Code **02135-7430**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **490.00**

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370651
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

C. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **20 WASHINGTON ST. 241**
 City **BRIGHTON** State **MA** Zip Code **02135-7430**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **490.00**

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370652
 Amount of Each Receipt this Period **25.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **300.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3854 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380293
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.384953
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387431
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3855 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396695
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397826
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400956
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3856 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.400957
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409125
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409794
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3857 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410542
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412104
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. POUPKO, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 WASHINGTON ST.
 241
 City BRIGHTON State MA Zip Code 02135-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420328
 Amount of Each Receipt this Period
 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3858 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POUPKO, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 WASHINGTON ST.
241

City BRIGHTON State MA Zip Code 02135-7430

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.422876

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. POWDERLY, TIMOTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3411 3RD STREET N

City ARLINGTON State VA Zip Code 22201-1713

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) APPLE INC Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2016

Transaction ID : SA11A.345961

Amount of Each Receipt this Period
2700.00

Memo Item CONTRIBUTION

C. POWELL, G, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3621 SARATOGA DRIVE

City NASHVILLE State TN Zip Code 37205-2539

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPX, INC Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11A.358372

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3859 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWELL, G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3621 SARATOGA DRIVE
 City NASHVILLE State TN Zip Code 37205-2539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPX, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394488
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POWELL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 WEST BROAD OAKS DR
 City HOUSTON State TX Zip Code 77056-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399360
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POWELL, JAMES, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2409 PAYNE ST
 City EVANSTON State IL Zip Code 60201-2512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NY LIFE INSURANCE Occupation (for Individual) INVESTMENT BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391608
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3860 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWELL, JOHN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2030 OCEANBROOK DR.

City WALL TOWNSHIP	State NJ	Zip Code 07719-9657
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350133

Amount of Each Receipt this Period
104.00

Memo Item CONTRIBUTION

B. POWELL, JOHN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2030 OCEANBROOK DR.

City WALL TOWNSHIP	State NJ	Zip Code 07719-9657
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372521

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. POWELL, KEITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address BOX 251
BOX251

City GARBER	State OK	Zip Code 73738-0251
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344377

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	244.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3861 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWELL, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 251**
BOX251
 City **GARBER** State **OK** Zip Code **73738-0251**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
07 / 01 / 2016
Transaction ID : SA11A.344378
 Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

B. POWELL, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 251**
BOX251
 City **GARBER** State **OK** Zip Code **73738-0251**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
08 / 01 / 2016
Transaction ID : SA11A.359014
 Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

C. POWELL, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 251**
BOX251
 City **GARBER** State **OK** Zip Code **73738-0251**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
09 / 01 / 2016
Transaction ID : SA11A.387852
 Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3862 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POWELL, WILLIAM, , ,

Mailing Address **1688 CASTLEBRIDGE CT**

City WESTLAKE VILLAGE	State CA	Zip Code 91362-4729
---------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
08 / 30 / 2016

Transaction ID : SA11A.383624

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POWELL, WILLIAM, , ,

Mailing Address **1688 CASTLEBRIDGE CT**

City WESTLAKE VILLAGE	State CA	Zip Code 91362-4729
---------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
09 / 22 / 2016

Transaction ID : SA11A.405865

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
POWELL, WILLIAM, NICHOLAS, MR.,

Mailing Address **2561 WILDWOOD RD**

City SALEM	State VA	Zip Code 24153-1662
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SALEM TOOLS	Occupation (for Individual) CEO
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
09 / 26 / 2016

Transaction ID : SA11A.407406

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3863 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 CHEVIOT HILLS COURT
 City WESTLAKE VILLAGE State CA Zip Code 91361-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368325
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. POWER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 CHEVIOT HILLS COURT
 City WESTLAKE VILLAGE State CA Zip Code 91361-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383602
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. POWER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 CHEVIOT HILLS COURT
 City WESTLAKE VILLAGE State CA Zip Code 91361-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419463
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3864 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWERS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 75 EMERALD CIRCLE

City VALLEJO	State CA	Zip Code 94589-2737
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

Transaction ID : SA11A.352366

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. POWERS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 75 EMERALD CIRCLE

City VALLEJO	State CA	Zip Code 94589-2737
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2016

Transaction ID : SA11A.375968

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. POWERS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 75 EMERALD CIRCLE

City VALLEJO	State CA	Zip Code 94589-2737
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2016

Transaction ID : SA11A.401394

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3865 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWERS, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 TALLEYRAND AVE.
 City JACKSONVILLE State FL Zip Code 32206-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378702
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. POWERS, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 TALLEYRAND AVE.
 City JACKSONVILLE State FL Zip Code 32206-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.411685
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. POWERS, WILLIAM, M.E., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 MARNE HWY STE 200
 City MOORESTOWN State NJ Zip Code 08057-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.354433
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3866 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWIS, ROBERT, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14301 BRANDERMILL WOODS TRAIL
APT A104

City MIDLOTHIAN State VA Zip Code 23112-4051

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407086

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. POWNEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1333 TAMARACK DRIVE

City MUNSTER State IN Zip Code 46321-4217

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.352783

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. POWNEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1333 TAMARACK DRIVE

City MUNSTER State IN Zip Code 46321-4217

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.388758

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3867 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATHER, LORENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3763 MISSOURI ROAD
 City MARIANNA State FL Zip Code 32446-5628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384524
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PRATHER, LORENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3763 MISSOURI ROAD
 City MARIANNA State FL Zip Code 32446-5628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397811
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PRATHER, LORENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3763 MISSOURI ROAD
 City MARIANNA State FL Zip Code 32446-5628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403072
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3868 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATHER, LORENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3763 MISSOURI ROAD
 City MARIANNA State FL Zip Code 32446-5628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407587
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PRATHER, LORENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3763 MISSOURI ROAD
 City MARIANNA State FL Zip Code 32446-5628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407605
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PRATT, DONALD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 RURAL ST
 City TOCKFORD State IL Zip Code 61107-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378846
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3869 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATT, DONALD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 RURAL ST
 City TOCKFORD State IL Zip Code 61107-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PRATT, DONALD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 RURAL ST
 City TOCKFORD State IL Zip Code 61107-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412341
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PRATT, IRVING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 53391
 City LAFAYETTE State LA Zip Code 70505-3391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WASTE AUDITORS, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355603
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3870 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATT, IRVING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 53391

City LAFAYETTE	State LA	Zip Code 70505-3391
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WASTE AUDITORS, INC.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355741

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

B. PRATT, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 NILES VIENNA RD

City VIENNA	State OH	Zip Code 44473-9519
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353736

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. PRATT, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 NILES VIENNA RD

City VIENNA	State OH	Zip Code 44473-9519
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410580

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3871 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRATT, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 NILES VIENNA RD
 City VIENNA State OH Zip Code 44473-9519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410585
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PREMANANDAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 LEGENDARY WAY
 City CENTERVILLE State OH Zip Code 45458-6105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.347021
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PREMANANDAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 LEGENDARY WAY
 City CENTERVILLE State OH Zip Code 45458-6105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366933
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3872 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRENNER, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 NE 35 STREET
 City LIGHHOUSE POINT State FL Zip Code 33064-8157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMPBELL AND ROSEMURGY REAL ESTATE Occupation (for Individual) BROKER ASSOCIATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352526
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PRESSLEY, HOMER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 HUNINGTON CHASE DRIVE
 City MADISON State AL Zip Code 35758-6921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368436
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PRESS, MARK, , DR., PH.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1948 E 24TH STREET
 City BROOKLYN State NY Zip Code 11229-2420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOURO COLLEGE Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392406
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3873 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRESSLEY, NORM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8464 MIRAMAR RD.

City SAN DIEGO	State CA	Zip Code 92126-4324
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410389

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. PRESTON, NANCYLEE, W., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2412 INGLESIDE AVENUE
APARTMENT 3C

City CINCINNATI	State OH	Zip Code 45206-2184
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387665

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. PRICE, C., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 FRUITVILLE ROAD

City GREENVILLE	State SC	Zip Code 29607-6011
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.376298

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3874 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRICE, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 FRUITVILLE ROAD
 City GREENVILLE State SC Zip Code 29607-6011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.376299
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PRICE, C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 FRUITVILLE ROAD
 City GREENVILLE State SC Zip Code 29607-6011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399592
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PRICE, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4812 WILLOW STREET
 City BELLAIRE State TX Zip Code 77401-4416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347755
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3875 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRICE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4418 N MONITOR AVENUE
 City CHICAGO State IL Zip Code 60630-3333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.373569
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. PRICE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 791 HAWTHORNE PLACE
 City LAKE FOREST State IL Zip Code 60045-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RR PRICE INC Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.401618
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. PRICKETT, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GREAT HOUSE FARM LANE
 City CHESAPEAKE CITY State MD Zip Code 21915-2107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382587
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3876 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRICKETT, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GREAT HOUSE FARM LANE
 City CHESAPEAKE CITY State MD Zip Code 21915-2107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413941
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. PRIESTER, HENRY, W., MR., PE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3772 SHERMAN ROAD
 City SHERMAN State IL Zip Code 62684-8050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IL DEPT. OF TRANSPORTATION Occupation (for Individual) AIRPORT DESIGN ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354801
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PRIESTER, HENRY, W., MR., PE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3772 SHERMAN ROAD
 City SHERMAN State IL Zip Code 62684-8050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IL DEPT. OF TRANSPORTATION Occupation (for Individual) AIRPORT DESIGN ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381856
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3877 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRILL, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5807 NORTHWEST EL REY DR.
City CAMAS State WA Zip Code 98607-9121
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358893
Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. PRINCE, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2224 REGENCY WOODS DR.
City LISLE State IL Zip Code 60532-1178
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359678
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PRINGLE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9115 FORTUNA DRIVE, APT 6302
City MERCER ISLAND State WA Zip Code 98040-3157
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361355
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3878 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRITCHARD, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1004 HOLIDAY

City PLAINVIEW	State TX	Zip Code 79072-6044
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : SA11A.352161

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. PRITCHARD, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1004 HOLIDAY

City PLAINVIEW	State TX	Zip Code 79072-6044
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : SA11A.352163

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PRITCHARD, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1004 HOLIDAY

City PLAINVIEW	State TX	Zip Code 79072-6044
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016

Transaction ID : SA11A.375850

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3879 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRITCHARD, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 HOLIDAY
 City PLAINVIEW State TX Zip Code 79072-6044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401432
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PROCTOR, DANIEL, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 VERNER DR.
 City LA PALMA State CA Zip Code 90623-2043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHOLESALE Occupation (for Individual) TRI WEST LTD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411095
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PROCTOR, DANIEL, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 VERNER DR.
 City LA PALMA State CA Zip Code 90623-2043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHOLESALE Occupation (for Individual) TRI WEST LTD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411097
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3880 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PROMBO, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 525 E. MAIN ST.

City MORRISON	State IL	Zip Code 61270-3053
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MORRISON INSTITUTE OF TECHNOLOGY	Occupation (for Individual) COLLEGE INSTRUCTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378667

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PROSCHOLD, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1978 CUNNINGHAM CT.

City GRAND JUNCTION	State CO	Zip Code 81507-9561
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348871

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. PROVINS, JANE, E., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113 N MASON ROAD

City BROOKLINE	State NH	Zip Code 03033-2471
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394967

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3881 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRUGER, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1132 CLARK STREET
 City BOWLING GREEN State OH Zip Code 43402-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395942
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PRUITT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7025 CASSIOPEIA CT.
 City SPARKS State NV Zip Code 89436-6394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355457
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PRUITT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7025 CASSIOPEIA CT.
 City SPARKS State NV Zip Code 89436-6394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382032
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3882 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRUITT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7025 CASSIOPEIA CT.
 City SPARKS State NV Zip Code 89436-6394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.385137
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

B. PRUITT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7025 CASSIOPEIA CT.
 City SPARKS State NV Zip Code 89436-6394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.385138
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

C. PRUITT, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 CLEARSPRING DR S
 City IRVING State TX Zip Code 75063-3394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370269
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	53.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3883 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRUITT, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 CLEARSPRING DR S
 City IRVING State TX Zip Code 75063-3394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : SA11A.382619
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. PRUITT, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 CLEARSPRING DR S
 City IRVING State TX Zip Code 75063-3394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.386784
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PRUITT, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 CLEARSPRING DR S
 City IRVING State TX Zip Code 75063-3394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 17 / 2016
Transaction ID : SA11A.400111
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3884 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRUITT, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 CLEARSPRING DR S
 City IRVING State TX Zip Code 75063-3394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.402815
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PRUITT, MICKEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 CLEARSPRING DR S
 City IRVING State TX Zip Code 75063-3394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.402943
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PUBLOW, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 896 HIGHLAND AVE.
 City ROCHESTER State NY Zip Code 14620-1861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 07 / 22 / 2016
Transaction ID : SA11A.353614
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3885 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUBLOW, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 896 HIGHLAND AVE.
 City ROCHESTER State NY Zip Code 14620-1861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375724
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PUBLOW, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 896 HIGHLAND AVE.
 City ROCHESTER State NY Zip Code 14620-1861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.404231
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PUCCI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1671 VIRGINIA
 City ELK GROVE VILLAGE State IL Zip Code 60007-2961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARK PUCCI Occupation (for Individual) MANAGER
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402403
 Amount of Each Receipt this Period
 16.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 216.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3886 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUCCI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1671 VIRGINIA

City ELK GROVE VILLAGE	State IL	Zip Code 60007-2961
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MARK PUCCI	Occupation (for Individual) MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402422

Amount of Each Receipt this Period

250.00

 Memo Item
CONTRIBUTION

B. PUGH, JANE, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3016 GRAHAM LANE

City TAMPA	State FL	Zip Code 33618-3724
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.361498

Amount of Each Receipt this Period

200.00

 Memo Item
CONTRIBUTION

C. PUGH, JANE, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3016 GRAHAM LANE

City TAMPA	State FL	Zip Code 33618-3724
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417127

Amount of Each Receipt this Period

200.00

 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3887 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.372954
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.372956
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.372957
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3888 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387382
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392723
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399411
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3889 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUGMIRE, RONALD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7923 WILLOWCREST ROAD
 City SALT LAKE CITY State UT Zip Code 84121-5726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405631
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. PULLMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 MANAGUA PLACE
 City CARLSBAD State CA Zip Code 92009-7105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357101
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. PULLMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 MANAGUA PLACE
 City CARLSBAD State CA Zip Code 92009-7105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388406
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3890 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PULLMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 MANAGUA PLACE
 City CARLSBAD State CA Zip Code 92009-7105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388409
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PULLMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 MANAGUA PLACE
 City CARLSBAD State CA Zip Code 92009-7105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419288
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PULLSBURY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1029 ALSTON ROAD
 City SANTA BARBARA State CA Zip Code 93108-2407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392520
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3891 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURCELL, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 S WASHINGTON STREET

City HINSDALE	State IL	Zip Code 60521-4530
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) R.W.BAIRD & CO.	Occupation (for Individual) INVESTMENT BANKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385230

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. PURCELL, PHILIP, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6300 N SAGEWOOD DR.
STE H-110

City PARK CITY	State UT	Zip Code 84098-7502
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTINENTAL INVESTORS	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
41100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.375444

Amount of Each Receipt this Period
41100.00

Memo Item
CONTRIBUTION

C. PURDY, GILBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3411 BOONE ROAD SE
105

City SALEM	State OR	Zip Code 97317-9336
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344326

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	66132.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3892 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURDY, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3411 BOONE ROAD SE
 105
 City SALEM State OR Zip Code 97317-9336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.359030
 Amount of Each Receipt this Period
 32.00
 Memo Item
 CONTRIBUTION

B. PURDY, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3411 BOONE ROAD SE
 105
 City SALEM State OR Zip Code 97317-9336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372480
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. PURDY, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3411 BOONE ROAD SE
 105
 City SALEM State OR Zip Code 97317-9336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382636
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	82.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3893 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURDY, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3411 BOONE ROAD SE
 105
 City SALEM State OR Zip Code 97317-9336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415278
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. PURDY, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 GREAT OAKS LANE
 City OTISFIELD State ME Zip Code 04270-6628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387386
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. PURDY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 NAVY COVE BLVD
 City GULF BREEZE State FL Zip Code 32561-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.360951
 Amount of Each Receipt this Period
 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3894 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURDY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 NAVY COVE BLVD
 City GULF BREEZE State FL Zip Code 32561-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394746
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PURDY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 NAVY COVE BLVD
 City GULF BREEZE State FL Zip Code 32561-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404371
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. PURDY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 NAVY COVE BLVD
 City GULF BREEZE State FL Zip Code 32561-4025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420409
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3895 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURDY, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 521 NAVY COVE BLVD

City GULF BREEZE	State FL	Zip Code 32561-4025
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422505

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. PURDY, VERL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4804 PELLYN FARM COURT

City CHARLOTTE	State NC	Zip Code 28226-6213
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CADRILLION CAPITAL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412966

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PURNELL, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 303BUCK SWAMP RD

City BRUNSWICK	State GA	Zip Code 31523-7044
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382205

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3896 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURNELL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303BUCK SWAMP RD
 City BRUNSWICK State GA Zip Code 31523-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382221
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. PURNELL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303BUCK SWAMP RD
 City BRUNSWICK State GA Zip Code 31523-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382224
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. PURSER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7714 RIDGECREST DR
 City ALEXANDRIA State VA Zip Code 22308-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NATIONAL BEER WHOLESALERS ASSOCIATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 07 / 06 / 2016
Transaction ID : SA11A.345253
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3897 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PURVIS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5140.
 City MIDLAND State TX Zip Code 79704-5140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL AND GAS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349152
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PURYEAR, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5911 W PROSPECT DRIVE
 City VISALIA State CA Zip Code 93291-8921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361290
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PURYEAR, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3740 W CALDWELL AVENUE
 City VISALIA State CA Zip Code 93277-9282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIONEER NURSERY Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406689
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3898 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUTNAM, JOSEPH, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 MISSION TRAIL ROAD
 City REDWOOD CITY State CA Zip Code 94062-3544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUTNAM AUTO Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390758
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349736
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362294
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3899 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365002
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389257
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408205
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3900 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412405
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. PUTNAM, MARIE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2055 N 26TH W
 City IDAHO FALLS State ID Zip Code 83402-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422249
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. PYLE, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3707 GILBERT AVENUE #17
 City DALLAS State TX Zip Code 75219-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351007
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3901 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PYLE, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3707 GILBERT AVENUE #17
 City DALLAS State TX Zip Code 75219-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.351010
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. PYLE, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3707 GILBERT AVENUE #17
 City DALLAS State TX Zip Code 75219-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374653
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. PYLE, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3707 GILBERT AVENUE #17
 City DALLAS State TX Zip Code 75219-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399576
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3902 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PYLE, SARAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3707 GILBERT AVENUE #17

City DALLAS State TX Zip Code 75219-4316

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400296

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. PYLE, SARAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3707 GILBERT AVENUE #17

City DALLAS State TX Zip Code 75219-4316

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400297

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. QUALY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 BRENTMOOR PARK

City CLAYTON State MO Zip Code 63105-3067

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350440

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3903 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358524
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366915
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380573
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3904 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380576
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417979
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. QUARLS, HARRY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3832 GREENBRIER DRIVE
 City DALLAS State TX Zip Code 75225-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLOBAL INFRASTRUCTURE PARTNERS Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.371163
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3905 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUART, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 E FLAMINGO RD
 349
 City LAS VEGAS State NV Zip Code 89119-5263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERON THERAPEUTICS Occupation (for Individual) RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 497.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396919
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. QUATROCHE, THOMAS, J., DR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 LONGLEAT PKWY
 City AMNHERST State NY Zip Code 14226-4112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERIE COUNTY MEDICAL CENTER Occupation (for Individual) SENIOR VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.383562
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. QUESENBERRY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 68
 City ABINGDON State VA Zip Code 24212-0068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399350
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3906 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUIGLEY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 MOUNTAIN WOOD DRIVE
City GREENWICH State CT Zip Code 06830-3335
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ML PIERCE FENNER & SMITH INC. Occupation (for Individual) VICE CHAIR CLIENT COV.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389048
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. QUINN, TOWNSEND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 20858
City COLUMBUS State OH Zip Code 43220-0858
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373637
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. QUIRINI, GENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 118 WOODSTOCK AV
City CLARENDON HILLS State IL Zip Code 60514-1133
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RIS Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370837
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3907 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. QUIRINI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 WOODSTOCK AV
 City CLARENDON HILLS State IL Zip Code 60514-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RIS PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.389368
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RABIDOUX, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1398 COLONY DR.
 City SALINE State MI Zip Code 48176-1094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GLACIER HILLS CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.374997
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RADCLIFFE, CHARLES, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1912 MARSH ROAD
 APT 115
 City WILMINGTON State DE Zip Code 19810-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414507
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3908 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RADDON, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10233 S GRAYBOULDER COURT
 City SANDY State UT Zip Code 84092-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373802
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. RADFORD, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4539 GREENCHAIN LOOP APT. 5
 City COEUR D ALENE State ID Zip Code 83814-6233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398474
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. RADKE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 W RAVINE CT
 City MEQUON State WI Zip Code 53092-5861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NORTHWESTERN MUTUAL VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387803
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3909 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RADO, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 N. DECATUR RD.
 304
 City ATLANTA State GA Zip Code 30307-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384429
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. RADO, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 N. DECATUR RD.
 304
 City ATLANTA State GA Zip Code 30307-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411911
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RAFF, GAROLD, D., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16095 SAINT CROIX CIR
 City HUNTINGTON BEACH State CA Zip Code 92649-2047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358596
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3910 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAGLAND, ELOISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1815 SHERRY LEA DRIVE
 City NEOSHO State MO Zip Code 64850-2930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAGLAND MILK INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360904
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RAGLAND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2522 EAST LUKE AVE
 City PHOENIX State AZ Zip Code 85016-2241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380650
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. RAHE, E PRESTON, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 348 MAGNOLIA LAKE COURT
 City AIKEN State SC Zip Code 29803-2653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAHE AND ASSOCIATES Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389418
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3911 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAHKONEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 75
 City MONSON State MA Zip Code 01057-0075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHERN CONSTRUCTION LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388881
 Amount of Each Receipt this Period 800.00
 Memo Item CONTRIBUTION

B. RAHMAN, ABDUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 HALLER CRESENT
 City S VALLEY State NY Zip Code 10977-6606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414515
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. RAHMIG, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26313 THEA GULCH RD
 City GOLDEN State CO Zip Code 80403-8190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383935
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3912 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAHMIG, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26313 THEA GULCH RD

City GOLDEN	State CO	Zip Code 80403-8190
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383946

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RAHMIG, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26313 THEA GULCH RD

City GOLDEN	State CO	Zip Code 80403-8190
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418807

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RAINES, BOBBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 154 SAINT ANDREWS DRIVE

City JACKSON	State MS	Zip Code 39211-2517
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380143

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3913 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, BOBBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 154 SAINT ANDREWS DRIVE

City JACKSON State MS Zip Code 39211-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
08 / 24 / 2016
Transaction ID : SA11A.380144

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RAINES, BOBBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 154 SAINT ANDREWS DRIVE

City JACKSON State MS Zip Code 39211-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
08 / 24 / 2016
Transaction ID : SA11A.380147

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RAINES, BOBBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 154 SAINT ANDREWS DRIVE

City JACKSON State MS Zip Code 39211-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.385920

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3914 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 SAINT ANDREWS DRIVE
 City JACKSON State MS Zip Code 39211-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.385922
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RAINES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 SAINT ANDREWS DRIVE
 City JACKSON State MS Zip Code 39211-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.385923
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RAINES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 SAINT ANDREWS DRIVE
 City JACKSON State MS Zip Code 39211-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 09 / 05 / 2016
Transaction ID : SA11A.389088
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3915 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 SAINT ANDREWS DRIVE
 City JACKSON State MS Zip Code 39211-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399791
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RAINES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 SAINT ANDREWS DRIVE
 City JACKSON State MS Zip Code 39211-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404925
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. RAINES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 SAINT ANDREWS DRIVE
 City JACKSON State MS Zip Code 39211-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404938
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3916 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 SAINT ANDREWS DRIVE
 City JACKSON State MS Zip Code 39211-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408988
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 04 / 2016
Transaction ID : SA11A.344201
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408367
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3917 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408369
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350122
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAINES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 GRAMMONT ST
 City MONROE State LA Zip Code 71201-7516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356359
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3918 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAINES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 611 GRAMMONT ST
City MONROE State LA Zip Code 71201-7516
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383104
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAINES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 611 GRAMMONT ST
City MONROE State LA Zip Code 71201-7516
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) GI CLINIC Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411330
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAISIAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 21190 CANYON OAK WAY
City CUPERTINO State CA Zip Code 95014-6572
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) HOOVER INSTITUTION Occupation (for Individual) ECONOMIST
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399460
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3919 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAISIAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21190 CANYON OAK WAY
 City CUPERTINO State CA Zip Code 95014-6572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOOVER INSTITUTION Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414356
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RAISIAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21190 CANYON OAK WAY
 City CUPERTINO State CA Zip Code 95014-6572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOOVER INSTITUTION Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414357
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RAKOW, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 545
 City ELGIN State IL Zip Code 60121-0545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391402
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3920 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RALPH, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2975 ROXBURGH DRIVE

City ROSWELL	State GA	Zip Code 30076-2444
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398510

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. RALPH, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 590 SUWANNEE RD STE 5000

City TYNDALL AFB	State FL	Zip Code 32403-5558
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAFR/DELTA	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420233

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RALSTON, WILLIAM, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 727 LANSLOWNE ROAD

City CHARLOTTE	State NC	Zip Code 28270-5901
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
362.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398609

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3921 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RALSTON, WILLIAM, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 727 LANSDOWNE ROAD
 City CHARLOTTE State NC Zip Code 28270-5901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 362.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398611
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RALSTON, WILLIAM, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 727 LANSDOWNE ROAD
 City CHARLOTTE State NC Zip Code 28270-5901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 362.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398612
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RAMALEY, JACK, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2295 DARTMOUTH AVENUE
 City BOULDER State CO Zip Code 80305-5207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417407
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3922 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 975.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.351886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 975.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354236
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 975.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364473
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3923 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373685
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377730
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381396
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3924 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMBHAROSE, RITA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25781 AMAPOLAS STREET
 City LOMA LINDA State CA Zip Code 92354-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406869
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. RAMBIN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30501 BOUQUET CANYON RD
 City SANTA CLARITA State CA Zip Code 91390-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353403
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAMBIN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30501 BOUQUET CANYON RD
 City SANTA CLARITA State CA Zip Code 91390-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368676
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3925 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMBIN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30501 BOUQUET CANYON RD
 City SANTA CLARITA State CA Zip Code 91390-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383798
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAMBIN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30501 BOUQUET CANYON RD
 City SANTA CLARITA State CA Zip Code 91390-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387531
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAMBIN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30501 BOUQUET CANYON RD
 City SANTA CLARITA State CA Zip Code 91390-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419448
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3926 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMIREZ, RENE, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 W NOLANA AVE STE 415
 City MCALLEN State TX Zip Code 78504-3089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATHFINDER PUBLIC AFFAIRS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367946
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. RAMLO, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CASTLE PARK WAY
 City OAKLAND State CA Zip Code 94611-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414874
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. RAMLO, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 CASTLE PARK WAY
 City OAKLAND State CA Zip Code 94611-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414908
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3927 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMMING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3413 VINTAGE DR
 City ROUND ROCK State TX Zip Code 78664-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAMMING LAND Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400103
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RAMMING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3413 VINTAGE DR
 City ROUND ROCK State TX Zip Code 78664-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAMMING LAND Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400104
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RAMMING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3413 VINTAGE DR
 City ROUND ROCK State TX Zip Code 78664-7902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAMMING LAND Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414171
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3928 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMOS, GISLEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7501 MILLER DRIVE
 City MIAMI State FL Zip Code 33155-5507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GISLEDA A RAMOS, DDS, PA Occupation (for Individual) ORTHODONTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410399
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RAMOS, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15315 CORNET AVENUE
 City SANTA FE SPRINGS State CA Zip Code 90670-5531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILATRON Occupation (for Individual) PHILATRON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364741
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RAMPERTAB, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 S POINTE DRIVE APT 2308
 City MIAMI BEACH State FL Zip Code 33139-7371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392893
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3929 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAMSEY, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9138 SELBORNE LANE
 City PALMETTO State GA Zip Code 30268-2268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381177
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. RANDALL, DICK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22348 REGNART RD.
 City CUPERTINO State CA Zip Code 95014-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6100.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401275
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RANDALL, DICK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22348 REGNART RD.
 City CUPERTINO State CA Zip Code 95014-4825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6100.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408233
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3930 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANDALL, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 775 SUNRIDGE RD

City FAIRLAWN	State OH	Zip Code 44333-3278
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353196

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RANDALL, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 775 SUNRIDGE RD

City FAIRLAWN	State OH	Zip Code 44333-3278
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387202

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RANDALL, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 775 SUNRIDGE RD

City FAIRLAWN	State OH	Zip Code 44333-3278
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387207

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3931 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANDOL, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 FRANKLIN STREET

City ALEXANDRIA	State VA	Zip Code 22314-3828
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016

Transaction ID : SA11A.352103

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RANDOL, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 FRANKLIN STREET

City ALEXANDRIA	State VA	Zip Code 22314-3828
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016

Transaction ID : SA11A.401171

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RANDOL, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 FRANKLIN STREET

City ALEXANDRIA	State VA	Zip Code 22314-3828
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.405788

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3932 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANDOL, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 FRANKLIN STREET
 City ALEXANDRIA State VA Zip Code 22314-3828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422242
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RANDOLPH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 BARKENTINE CT
 City APTOS State CA Zip Code 95003-3751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365424
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RANDOLPH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 BARKENTINE CT
 City APTOS State CA Zip Code 95003-3751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3933 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANFT, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 64 CUPSAW AVE

City RINGWOOD	State NJ	Zip Code 07456-2920
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLLEN IP	Occupation (for Individual) PATENT ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.360235

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RANFT, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 64 CUPSAW AVE

City RINGWOOD	State NJ	Zip Code 07456-2920
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLLEN IP	Occupation (for Individual) PATENT ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384603

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RANFT, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 64 CUPSAW AVE

City RINGWOOD	State NJ	Zip Code 07456-2920
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLLEN IP	Occupation (for Individual) PATENT ATTORNEY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398249

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3934 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANFT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7239 W SPRINGCREEK RD
 City BELOIT State WI Zip Code 53511-9673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELOIT AUCTION & REALTY INC. Occupation (for Individual) AUCTIONEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387184
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RANGANATH, GORUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 TULIP AVE.
 City MCALLEN State TX Zip Code 78504-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 07 / 2016
Transaction ID : SA11A.363298
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. RANGANATH, GORUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 TULIP AVE.
 City MCALLEN State TX Zip Code 78504-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408424
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3935 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANGLAS, GERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 9198
 City RANCHO SANTA FE State CA Zip Code 92067-4198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GERRY RANGLAS Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349312
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RANNO, ROSELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 BALSAM RD
 City BRIARCLIFF MANOR State NY Zip Code 10510-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356276
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. RANNO, ROSELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 BALSAM RD
 City BRIARCLIFF MANOR State NY Zip Code 10510-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383020
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3936 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANNO, ROSELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 BALSAM RD
 City BRIARCLIFF MANOR State NY Zip Code 10510-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411291
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. RANSCHAU, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ENSENADA AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347434
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RANSCHAU, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ENSENADA AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348715
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3937 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANSCHAU, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ENSENADA AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379863
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RANSCHAU, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ENSENADA AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392089
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. RANSCHAU, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ENSENADA AVE.
 City THOUSAND OAKS State CA Zip Code 91320-3628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411910
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3938 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RANTS, ROLAND, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016 Transaction ID : SA11A.382037
Mailing Address 724 COLUMBIA ST NW		Amount of Each Receipt this Period 250.00
City OLYMPIA	State WA	Zip Code 98501-1291
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) THE RANTS GROUP	Occupation (for Individual) REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RAO, TANNIRU, , ,		Date of Receipt MM / DD / YYYY 07 / 27 / 2016 Transaction ID : SA11A.356245
Mailing Address 14950 DEL PRADO CT		Amount of Each Receipt this Period 100.00
City ELM GROVE	State WI	Zip Code 53122-1513
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MARKET PROBE	Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RAO, TANNIRU, , ,		Date of Receipt MM / DD / YYYY 08 / 04 / 2016 Transaction ID : SA11A.362170
Mailing Address 14950 DEL PRADO CT		Amount of Each Receipt this Period 250.00
City ELM GROVE	State WI	Zip Code 53122-1513
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MARKET PROBE	Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3939 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RAO, TANNIRU, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14950 DEL PRADO CT

City ELM GROVE	State WI	Zip Code 53122-1513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARKET PROBE	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2016

Transaction ID : SA11A.383099

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RAO, TANNIRU, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14950 DEL PRADO CT

City ELM GROVE	State WI	Zip Code 53122-1513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARKET PROBE	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407891

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RAO, TANNIRU, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14950 DEL PRADO CT

City ELM GROVE	State WI	Zip Code 53122-1513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARKET PROBE	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.411335

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3940 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAPISARDA, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2593 W 13TH ST
 City BROOKLYN State NY Zip Code 11223-5812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDWOOD AMBULANCE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400481
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

B. RAPLEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 E RIM ROAD
 City FRANKTOWN State CO Zip Code 80116-8628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383397
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION

C. RAPLEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 E RIM ROAD
 City FRANKTOWN State CO Zip Code 80116-8628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393860
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3941 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAPLEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 E RIM ROAD
 City FRANKTOWN State CO Zip Code 80116-8628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407168
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344324
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344325
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 164.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3942 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1834 JOHNSON AVE

City FORT DODGE	State IA	Zip Code 50501-8572
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNETH RASCH	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
766.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2016

Transaction ID : SA11A.353186

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. RASCH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1834 JOHNSON AVE

City FORT DODGE	State IA	Zip Code 50501-8572
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNETH RASCH	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
766.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2016

Transaction ID : SA11A.357660

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. RASCH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1834 JOHNSON AVE

City FORT DODGE	State IA	Zip Code 50501-8572
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNETH RASCH	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
766.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2016

Transaction ID : SA11A.382882

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3943 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382883
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382884
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383106
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 88.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3944 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383908
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383909
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383918
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3945 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383919
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.384938
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.384939
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 70.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3946 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396748
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397752
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397753
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3947 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407496
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408099
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RASCH, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 JOHNSON AVE
 City FORT DODGE State IA Zip Code 50501-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH RASCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 766.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417993
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3948 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASCH, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1834 JOHNSON AVE

City FORT DODGE	State IA	Zip Code 50501-8572
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KENNETH RASCH	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
766.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417995

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RASH JR., THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 STATE STREET

City CHARLESTON	State SC	Zip Code 29401-2812
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.363137

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RASKOSKY, VIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 626 CORAL WAY
1004

City CORAL GABLES	State FL	Zip Code 33134-7504
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380851

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3949 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RASMUSSEN, MARYANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 E 63RD ST
 APT. 19A
 City NEW YORK State NY Zip Code 10065-7640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405590
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. RASMUSSEN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2857
 City MARTINEZ State CA Zip Code 94553-7857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361469
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. RATCHFORD, HERMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 838 OATES RD
 City BESSEMER CITY State NC Zip Code 28016-7572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHWOOD REALTY Occupation (for Individual) APARTMENT OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417883
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3950 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RATCHFORD, HERMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 838 OATES RD

City BESSEMER CITY	State NC	Zip Code 28016-7572
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWOOD REALTY	Occupation (for Individual) APARTMENT OWNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417887

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RATCHFORD, HERMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 838 OATES RD

City BESSEMER CITY	State NC	Zip Code 28016-7572
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWOOD REALTY	Occupation (for Individual) APARTMENT OWNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417889

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RATHBONE, JAMES, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 NE RAVEN CT.

City BEND	State OR	Zip Code 97701-8816
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412150

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3951 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RATHBONE, JAMES, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 NE RAVEN CT.

City BEND	State OR	Zip Code 97701-8816
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412152

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RATHMELL, BONNIE, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 LOVE BIRD LANE

City MURPHY	State TX	Zip Code 75094-3264
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406902

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RATHS, ELEANOR, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1144 GRANNY WHITE COURT

City NASHVILLE	State TN	Zip Code 37204-4115
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348948

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3952 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RATHS, ELEANOR, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1144 GRANNY WHITE COURT
 City NASHVILLE State TN Zip Code 37204-4115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372764
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RATHS, ELEANOR, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1144 GRANNY WHITE COURT
 City NASHVILLE State TN Zip Code 37204-4115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399854
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RATHS, ELEANOR, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1144 GRANNY WHITE COURT
 City NASHVILLE State TN Zip Code 37204-4115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419034
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3953 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RATZLAFF, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30642 WHITE OAK DRIVE
 City BANGOR State MI Zip Code 49013-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373215
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. RATZLAFF, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30642 WHITE OAK DRIVE
 City BANGOR State MI Zip Code 49013-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373234
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. RATZLAFF, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30642 WHITE OAK DRIVE
 City BANGOR State MI Zip Code 49013-9521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373240
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3954 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAU, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 POINT NORTH DRIVE
 City SALEM State SC Zip Code 29676-4113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411761
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. RAUSH, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 WILMONT
 City WAUKESHA State WI Zip Code 53189-7924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLONE STORAGE Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419972
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RAWSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3121 MAPLE DRIVE NE SUITE 103
 City ATALNTA State GA Zip Code 30305-2519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409648
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3955 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAY, CARROLL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 JEFFERSON STREET
 SUITE 4000
 City HOUSTON State TX Zip Code 77002-7913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348352
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. RAY, CARROLL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 JEFFERSON STREET
 SUITE 4000
 City HOUSTON State TX Zip Code 77002-7913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANDREWS KURTH Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417434
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. RAY JR, HALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 AUSTRIAN RD
 City GRAND PRAIRIE State TX Zip Code 75050-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356369
 Amount of Each Receipt this Period 135.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3956 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RAY JR, HALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 AUSTRIAN RD
 City GRAND PRAIRIE State TX Zip Code 75050-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 08 / 01 / 2016
Transaction ID : SA11A.359048
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. RAY JR, HALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 AUSTRIAN RD
 City GRAND PRAIRIE State TX Zip Code 75050-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 08 / 08 / 2016
Transaction ID : SA11A.363229
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. RAY JR, HALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 AUSTRIAN RD
 City GRAND PRAIRIE State TX Zip Code 75050-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 08 / 08 / 2016
Transaction ID : SA11A.363230
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3957 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAY JR, HALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 AUSTRIAN RD
 City GRAND PRAIRIE State TX Zip Code 75050-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364818
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RAY JR, HALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 AUSTRIAN RD
 City GRAND PRAIRIE State TX Zip Code 75050-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389268
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. REA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2964 PEACHTREE RD NW STE 200
 City ATLANTA State GA Zip Code 30305-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REA VENTURES GROUP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.367972
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3958 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REAGAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 155 CRESCENT DRIVE

City PUNTA GORDA	State FL	Zip Code 33950-5112
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344362

Amount of Each Receipt this Period
32.00

Memo Item CONTRIBUTION

B. REAGAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 155 CRESCENT DRIVE

City PUNTA GORDA	State FL	Zip Code 33950-5112
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344370

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. REAGAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 155 CRESCENT DRIVE

City PUNTA GORDA	State FL	Zip Code 33950-5112
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
358.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344371

Amount of Each Receipt this Period
32.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	94.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3959 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359020
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386387
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386432
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 82.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3960 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.00

Date of Receipt
 09 / 01 / 2016
Transaction ID : SA11A.387853
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.397847
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. REAGAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 CRESCENT DRIVE
 City PUNTA GORDA State FL Zip Code 33950-5112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.397862
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	82.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3961 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REAGAN, RICHARD, , ,

Mailing Address **155 CRESCENT DRIVE**

City **PUNTA GORDA** State **FL** Zip Code **33950-5112**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **358.00**

Date of Receipt
09 / 23 / 2016

Transaction ID : SA11A.409365

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REAGAN, RICHARD, , ,

Mailing Address **155 CRESCENT DRIVE**

City **PUNTA GORDA** State **FL** Zip Code **33950-5112**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **358.00**

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.409757

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REAGAN, RICHARD, , ,

Mailing Address **155 CRESCENT DRIVE**

City **PUNTA GORDA** State **FL** Zip Code **33950-5112**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **358.00**

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.409758

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3962 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REARDON, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 655 ST. JAMES CT.

City BELTON	State MO	Zip Code 64012-2196
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2016

Transaction ID : SA11A.408413

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. REBHOLZ, DAVID, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11772 CALLETA COURT

City PALM BEACH GARDENS	State FL	Zip Code 33418-1560
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2016

Transaction ID : SA11A.396358

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. REBHOLZ SR., EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 SOUTH OCEAN DR APT 501

City FORT LAUDERDALE	State FL	Zip Code 33316-3723
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2016

Transaction ID : SA11A.346932

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3963 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REBHOLZ SR., EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 SOUTH OCEAN DR APT 501

City FORT LAUDERDALE	State FL	Zip Code 33316-3723
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.357398

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. REBHOLZ SR., EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 SOUTH OCEAN DR APT 501

City FORT LAUDERDALE	State FL	Zip Code 33316-3723
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.357399

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. REBHOLZ SR., EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 SOUTH OCEAN DR APT 501

City FORT LAUDERDALE	State FL	Zip Code 33316-3723
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.415873

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3964 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. REBOL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 YATES TERRACE
 City FORT MORGAN State CO Zip Code 80701-9217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.362808
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. RECKARD, CRAIG, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NORTH WARWICK AVENUE
 City WESTMONT State IL Zip Code 60559-1715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398799
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RECKARD, CRAIG, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NORTH WARWICK AVENUE
 City WESTMONT State IL Zip Code 60559-1715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405428
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 3965 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. REDD, DOROTHY, F., ,

Mailing Address 1884 E 2825 N

City LAYTON State UT Zip Code 84040-3219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359687

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. REDD, DOROTHY, F., ,

Mailing Address 1884 E 2825 N

City LAYTON State UT Zip Code 84040-3219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386892

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. REDD, DOROTHY, F., ,

Mailing Address 1884 E 2825 N

City LAYTON State UT Zip Code 84040-3219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.419372

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3966 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. REDENBAUGH, RUSSELL, , ,			Date of Receipt								
Mailing Address PO BOX 8020			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 33%;">Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">08</td> <td style="text-align: center;">29</td> <td style="text-align: center;">2016</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y	08	29	2016
M M M	D D D	Y Y Y Y Y Y									
08	29	2016									
City GARDEN CITY			State NY	Zip Code 11530-8020							
FEC ID number of contributing federal political committee. C			Transaction ID : SA11A.382327								
Name of Employer (for Individual) KAIROS CAPITAL ADVISORS			Occupation (for Individual) FINANCIAL ADVISOR								
Amount of Each Receipt this Period 100.00			<input type="checkbox"/> Memo Item CONTRIBUTION								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00									

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. REDENBAUGH, RUSSELL, , ,			Date of Receipt								
Mailing Address PO BOX 8020			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 33%;">Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">09</td> <td style="text-align: center;">19</td> <td style="text-align: center;">2016</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y	09	19	2016
M M M	D D D	Y Y Y Y Y Y									
09	19	2016									
City GARDEN CITY			State NY	Zip Code 11530-8020							
FEC ID number of contributing federal political committee. C			Transaction ID : SA11A.399505								
Name of Employer (for Individual) KAIROS CAPITAL ADVISORS			Occupation (for Individual) FINANCIAL ADVISOR								
Amount of Each Receipt this Period 100.00			<input type="checkbox"/> Memo Item CONTRIBUTION								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00									

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. REDENBAUGH, RUSSELL, , ,			Date of Receipt								
Mailing Address PO BOX 8020			<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 33%;">Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">09</td> <td style="text-align: center;">22</td> <td style="text-align: center;">2016</td> </tr> </table>			M M M	D D D	Y Y Y Y Y Y	09	22	2016
M M M	D D D	Y Y Y Y Y Y									
09	22	2016									
City GARDEN CITY			State NY	Zip Code 11530-8020							
FEC ID number of contributing federal political committee. C			Transaction ID : SA11A.403256								
Name of Employer (for Individual) KAIROS CAPITAL ADVISORS			Occupation (for Individual) FINANCIAL ADVISOR								
Amount of Each Receipt this Period 100.00			<input type="checkbox"/> Memo Item CONTRIBUTION								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00									

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3967 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REDFERN, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6203 SKAHAN LANE
 City AUSTIN State TX Zip Code 78739-1687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANIELS-HEAD MANAGEMENT CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349866
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. REDFERN, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6203 SKAHAN LANE
 City AUSTIN State TX Zip Code 78739-1687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANIELS-HEAD MANAGEMENT CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376170
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. REDFERN, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6203 SKAHAN LANE
 City AUSTIN State TX Zip Code 78739-1687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANIELS-HEAD MANAGEMENT CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400865
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3968 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REDING, SHERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 GOLFERS PASS RD
 City INCLINE VILLAGE State NV Zip Code 89451-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353779
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. REDING, SHERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 GOLFERS PASS RD
 City INCLINE VILLAGE State NV Zip Code 89451-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358234
 Amount of Each Receipt this Period
 45.00
 Memo Item
 CONTRIBUTION

C. REDING, SHERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 GOLFERS PASS RD
 City INCLINE VILLAGE State NV Zip Code 89451-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363741
 Amount of Each Receipt this Period
 45.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3969 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REDING, SHERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 GOLFERS PASS RD
 City INCLINE VILLAGE State NV Zip Code 89451-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375762
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. REDING, SHERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 GOLFERS PASS RD
 City INCLINE VILLAGE State NV Zip Code 89451-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392148
 Amount of Each Receipt this Period 45.00
 Memo Item CONTRIBUTION

C. REDING, SHERRILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 GOLFERS PASS RD
 City INCLINE VILLAGE State NV Zip Code 89451-8820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404252
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3970 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REDL, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 WASHINGTON STREET
 STE 100
 City POUGHKEEPSIE State NY Zip Code 12601-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381514
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. REED, C., EDWARD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2087
 City CHULA VISTA State CA Zip Code 91912-2087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414522
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. REED, CLARKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 BAYOU ROAD
 City GREENVILLE State MS Zip Code 38701-7702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376808
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3971 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17023 BLUEWATER LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-2929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389295
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. REED, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17023 BLUEWATER LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-2929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389297
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. REED, MARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17023 BLUEWATER LANE
 City HUNTINGTON BEACH State CA Zip Code 92649-2929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422146
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3972 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 SPRUCE AVENUE

City KENNEBUNKPORT	State ME	Zip Code 04046-5148
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRSS WEALTH MANAGEMENT LLC	Occupation (for Individual) FINANCIAL PLANNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394882

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. REED, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42 WEST ROAD

City CHICHESTER	State NH	Zip Code 03258-6125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.390977

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

C. REED, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42 WEST ROAD

City CHICHESTER	State NH	Zip Code 03258-6125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.390980

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3973 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. REED, VANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 PALOMINO
 City AMARILLO State TX Zip Code 79106-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REED BEVERAGE Occupation (for Individual) WHOLESALE DISTRIBUTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11A.346090
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. REED, WILLIAM, G., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1218 3RD AVE
 City SEATTLE State WA Zip Code 98101-3097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.367882
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. REEDER, KEN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 MONETS LN
 City CINCINNATI State OH Zip Code 45241-3864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAR EXCELLENCE SYSTEMS Occupation (for Individual) SOFTWARE DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 23 / 2016**
Transaction ID : SA11A.354640
 Amount of Each Receipt this Period 175.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12675.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3974 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEDER, KEN, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3810 MONETS LN

City CINCINNATI	State OH	Zip Code 45241-3864
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PAR EXCELLENCE SYSTEMS	Occupation (for Individual) SOFTWARE DEVELOPER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.362969

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. REESER, FREDERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 CHINABERRY LANE

City KIAWAH ISLAND	State SC	Zip Code 29455-5854
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369938

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. REETZ, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15170 FISH POINT ROAD SE

City PRIOR LAKE	State MN	Zip Code 55372-1945
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.421932

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3975 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEVES, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 WEST CONWAY DR
 City ATLANTA State GA Zip Code 30327-3633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351926
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. REEVES, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 WEST CONWAY DR
 City ATLANTA State GA Zip Code 30327-3633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397825
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. REEVES, FRANK, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 NEW MARKET AVENUE
 City LEBANON State TN Zip Code 37087-4258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYATT, TARRANT & COMBS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389010
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3976 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REEVES, JESS, L., REV.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 OXFORD VILLAGE CIRCLE
 185
 City COLUMBIA State TN Zip Code 38401-4784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 285.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368576
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. REGAN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 790 BROMFIELD ROAD
 City SAN MATEO State CA Zip Code 94402-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381530
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. REHAK, JOHN, F., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6543 ASHFORD CT
 City EAST AMHERST State NY Zip Code 14051-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BENCHMARK GROUP Occupation (for Individual) OWNER
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.383557
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3977 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REHAK, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13560 TRIADELPHIA MILL ROAD
 City CLARKSVILLE State MD Zip Code 21029-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-ATLANTIC DOOR GROUP LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364274
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. REHBERG, DENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 US HIGHWAY 3
 City BILLINGS State MT Zip Code 59106-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11A.398462
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. REHNERT, GEOFFREY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 HUNTINGTON AVE
 City BOSTON State MA Zip Code 02199-7603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUDAX GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.421203
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3978 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REID, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 S OCEAN BOULEVARD S203
 City BOCA RATON State FL Zip Code 33432-8529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.397237
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. REID, CLARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 MASTERS BLVD
 City SHALIMAR State FL Zip Code 32579-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.387076
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. REID, CLARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 MASTERS BLVD
 City SHALIMAR State FL Zip Code 32579-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408890
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3979 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REID, PAUL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 HARDING AVE
 City LOCKPORT State NY Zip Code 14094-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REID GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt **07 / 05 / 2016**
Transaction ID : SA11A.345223
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. REID, PAUL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 HARDING AVE
 City LOCKPORT State NY Zip Code 14094-6020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REID GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379410
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. REID, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 HAWTHORNE AVE
 City ALBANY State NY Zip Code 12203-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.391527
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3980 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REID, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 GALLERIA DR.

City SAN ANTONIO	State TX	Zip Code 78257-1712
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAA	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.360263

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. REID, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 445 MADISON ST

City DENVER	State CO	Zip Code 80206-4438
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400149

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. REIFF, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9225 NW ASH ST

City PORTLAND	State OR	Zip Code 97229-6584
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367922

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3981 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REILLY, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 909 HARVARD AVE. EAST

City SEATTLE	State WA	Zip Code 98102-4561
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391754

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. REILLY, J., B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1577 SAUCON VALLEY RD

City BETHLEHEM	State PA	Zip Code 18015-5259
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITY CENTER INVESTMENT CORP.	Occupation (for Individual) PRESIDENT AND CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11A.346086

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. REILLY, SUSAN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9225 NE 13TH STREET

City CLYDE HILL	State WA	Zip Code 98004-3449
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380151

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3982 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. REILLY, SUSAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 NE 13TH STREET
 City CLYDE HILL State WA Zip Code 98004-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383697
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REILLY, SUSAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 NE 13TH STREET
 City CLYDE HILL State WA Zip Code 98004-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.383704
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. REILLY, SUSAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9225 NE 13TH STREET
 City CLYDE HILL State WA Zip Code 98004-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.411987
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3983 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REINDERS, RICHARD, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address N5915 WILLOW GLEN ROAD

City SULLIVAN	State WI	Zip Code 53178-9727
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016
Transaction ID : SA11A.383673

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. REINER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1316 E CALVADA BLVD

City PAHRUMP	State NV	Zip Code 89048-5692
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOPE MEDICAL	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016
Transaction ID : SA11A.350822

Amount of Each Receipt this Period
135.00

Memo Item CONTRIBUTION

C. REINER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1316 E CALVADA BLVD

City PAHRUMP	State NV	Zip Code 89048-5692
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOPE MEDICAL	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
555.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016
Transaction ID : SA11A.358182

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	435.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3984 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REINER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 E CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048-5692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE MEDICAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374654
 Amount of Each Receipt this Period 135.00
 Memo Item CONTRIBUTION

B. REINER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 E CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048-5692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE MEDICAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399691
 Amount of Each Receipt this Period 135.00
 Memo Item CONTRIBUTION

C. REINER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 E CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048-5692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE MEDICAL Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411102
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3985 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REINHEIMER, HOWARD, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 S PALM AVE #102
 City SARASOTA State FL Zip Code 34236-6795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389579
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. REISERT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2024 MARTINS POINT ROAD
 City KITTY HAWK State NC Zip Code 27949-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365982
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. REISHER, MARY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7233 S ELIZABETH CT
 City ENGLEWOOD State CO Zip Code 80113-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.356861
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 16400.00
TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3986 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. REISS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 SIGNAL HILL RD
 City LAKE PLACID State NY Zip Code 12946-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344342
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. REISS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 SIGNAL HILL RD
 City LAKE PLACID State NY Zip Code 12946-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.359004
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. REISS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 SIGNAL HILL RD
 City LAKE PLACID State NY Zip Code 12946-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394284
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3987 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REITER, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14728 HOLLYHOCK DRIVE

City OKLAHOMA CITY	State OK	Zip Code 73142-1804
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383307

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. REITZEL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10165 FIG GROVE ROAD

City MADERA	State CA	Zip Code 93636-8804
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379752

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. REMICK, JOHN, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3232 FOX HOLLOW CT. SW

City ROCHESTER	State MN	Zip Code 55902-6600
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.356842

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3988 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.378716
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.391119
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391714
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3989 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391716
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399045
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RENNICK, ELIZABETH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 MARYLAND AVE.
 City SOMERSET State MA Zip Code 02726-3783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399046
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3990 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RENO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5435 KENWOOD RD UNIT 1401
 City CINCINNATI State OH Zip Code 45227-1341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416510
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. RENO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5435 KENWOOD RD UNIT 1401
 City CINCINNATI State OH Zip Code 45227-1341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416519
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. REQUIST, NORRIS, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 916 N LAFAYETTE STREET
 City DENVER State CO Zip Code 80218-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 07 / 12 / 2016
Transaction ID : SA11A.346181
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3991 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. REQUIST, NORRIS, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 916 LAFAYETTE STREET
 City DENVER State CO Zip Code 80218-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417075
 Amount of Each Receipt this Period 660.00
 Memo Item CONTRIBUTION

B. REUSCHER, RICHARD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 CHARLES STREET
 City SAINT MARYS State PA Zip Code 15857-1116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417386
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. REUTER, MICHAEL, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 RIVER SEINE ST
 City COLUMBUS State OH Zip Code 43221-4780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353326
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 3992 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REUTER, MICHAEL, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 RIVER SEINE ST
 City COLUMBUS State OH Zip Code 43221-4780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363845
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REUTER, MICHAEL, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 RIVER SEINE ST
 City COLUMBUS State OH Zip Code 43221-4780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380038
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. REUTER, MICHAEL, D., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3505 RIVER SEINE ST
 City COLUMBUS State OH Zip Code 43221-4780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409872
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3993 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REVENNAUGH, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6325 MULESHOE BEND
 City MARBLE FALLS State TX Zip Code 78654-4098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384696
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. REYES, DAVID, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6250 N RIVER RD
 City ROSEMONT State IL Zip Code 60018-4247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REYES HOLDINGS LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.393893
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. REYES, J. CHRISTOPHER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S. FLAGER DR. STE. 1500
 City WEST PALM BEACH State FL Zip Code 33401-6157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REYES HOLDINGS, INC. Occupation (for Individual) CO-CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.393890
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3994 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYES, M. JUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S. FLAGLER DR. STE. 1500

City WEST PALM BEACH	State FL	Zip Code 33401-6157
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REYES HOLDINGS, INC.	Occupation (for Individual) CO-CHAIRMAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11A.393889

Amount of Each Receipt this Period
100000.00

Memo Item CONTRIBUTION

B. REYNOLDS, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 BURGA LOOP

City CHULA VISTA	State CA	Zip Code 91910-8071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.350973

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. REYNOLDS, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 BURGA LOOP

City CHULA VISTA	State CA	Zip Code 91910-8071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11A.369981

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 3995 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 BURGA LOOP

City CHULA VISTA	State CA	Zip Code 91910-8071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374649

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. REYNOLDS, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 BURGA LOOP

City CHULA VISTA	State CA	Zip Code 91910-8071
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399705

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. REYNOLDS, ARTHUR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6013 RIVER DR.

City MASON NECK	State VA	Zip Code 22079-4125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365837

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3996 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 97
 City LAGRANGE State IN Zip Code 46761-0097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASTERCRAFT INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.404795
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. REYNOLDS, PETER, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 STREAMSIDE LANE C106
 City THOUSAND OAKS State CA Zip Code 91360-8421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349227
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. REYNOLDS, PETER, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 STREAMSIDE LANE C106
 City THOUSAND OAKS State CA Zip Code 91360-8421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358632
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3997 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, PETER, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3370 STREAMSIDE LANE
C106

City THOUSAND OAKS State CA Zip Code 91360-8421

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11A.379614

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. REYNOLDS, PETER, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3370 STREAMSIDE LANE
C106

City THOUSAND OAKS State CA Zip Code 91360-8421

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2016

Transaction ID : SA11A.401194

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. REYNOLDS, PETER, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3370 STREAMSIDE LANE
C106

City THOUSAND OAKS State CA Zip Code 91360-8421

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417777

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3998 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 07 / 09 / 2016
Transaction ID : SA11A.346704
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.347700
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363909
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3999 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382881
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. REYNOLDS, ROLAND, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 CENTAURI
 City GRAND JUNCTION State CO Zip Code 81506-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392132
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. REYNOLDS, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 SAKONNET TRAIL
 City PINEHURST State NC Zip Code 28374-6802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364316
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4000 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 SAKONNET TRAIL
 City PINEHURST State NC Zip Code 28374-6802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409581
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. REYNOLDS, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7874
 City HUNTINGTON State WV Zip Code 25778-7874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406854
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. REYNOLDS, SYDNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 S 1000 E
 City OREM State UT Zip Code 84097-4715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392668
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4001 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, SYDNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 S 1000 E
 City OREM State UT Zip Code 84097-4715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410196
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. REYNOLDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10777 SANTA MONICA BLVD
 City LOS ANGELES State CA Zip Code 90025-4718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378840
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. REYNOLDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10777 SANTA MONICA BLVD
 City LOS ANGELES State CA Zip Code 90025-4718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378841
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4002 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10777 SANTA MONICA BLVD

City LOS ANGELES	State CA	Zip Code 90025-4718
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415293

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. REZNIK, ELEANORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 47TH STREET

City BROOKLYN	State NY	Zip Code 11232-4225
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COTRONICS CORP	Occupation (for Individual) OFFICE MGR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2016

Transaction ID : SA11A.347016

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. REZNIK, ELEANORE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 47TH STREET

City BROOKLYN	State NY	Zip Code 11232-4225
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COTRONICS CORP	Occupation (for Individual) OFFICE MGR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2016

Transaction ID : SA11A.366938

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4003 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REZNIK, ELEANORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 47TH STREET
 City BROOKLYN State NY Zip Code 11232-4225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COTRONICS CORP Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404977
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REZNIK, ELEANORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 47TH STREET
 City BROOKLYN State NY Zip Code 11232-4225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COTRONICS CORP Occupation (for Individual) OFFICE MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408343
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RHEEM, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 SAN MIGUEL CIRCLE
 OWN
 City PLACENTIA State CA Zip Code 92870-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DYNAMMECH CORPORATION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349083
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4004 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RHEEM, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 SAN MIGUEL CIRCLE
OWN

City PLACENTIA	State CA	Zip Code 92870-6228
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DYNAMECH CORPORATION	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.369063

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RHEEM, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 SAN MIGUEL CIRCLE
OWN

City PLACENTIA	State CA	Zip Code 92870-6228
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DYNAMECH CORPORATION	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2016

Transaction ID : SA11A.398665

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RHEIN, PETE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1407 SOUTH HOLMBY AVENUE

City LOS ANGELES	State CA	Zip Code 90024-5104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2016

Transaction ID : SA11A.345923

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4005 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RHEIN, PETE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 SOUTH HOLMBY AVENUE
 City LOS ANGELES State CA Zip Code 90024-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348359
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. RHEIN, PETE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 SOUTH HOLMBY AVENUE
 City LOS ANGELES State CA Zip Code 90024-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390706
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

C. RHODEN, RODNEY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4111 S 144TH STREET
 City OMAHA State NE Zip Code 68137-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411824
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4006 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RHYNE, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 368

City BELLEVUE	State WA	Zip Code 98009-0368
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WASHINGTON GOLD EXCHANGE LLC	Occupation (for Individual) SALESMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016

Transaction ID : SA11A.398501

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RHYNE, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1468 RIDGEMERE LANE

City WINSTON SALEM	State NC	Zip Code 27106-4483
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WELLS FARGO	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016

Transaction ID : SA11A.359627

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. RICCI, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 MONTECITO

City SAN ANGELO	State TX	Zip Code 76901-4559
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11A.355322

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4007 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICCI, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1107 MONTECITO

City SAN ANGELO	State TX	Zip Code 76901-4559
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386084

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RICCIARDI, MATTHEW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 33 LITCHFIELD ROAD

City PORT WASHINGTON	State NY	Zip Code 11050-3814
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METLIFE INC.	Occupation (for Individual) CHIEF COUNSEL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.393880

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RICE, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2205

City NEW LONDON	State NH	Zip Code 03257-2205
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406861

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4008 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICE, DONALD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10126 EMPYREAN WAY #103
 City LOS ANGELES State CA Zip Code 90067-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388719
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. RICE, EDWIN, C., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 S EDGEWATER DR
 City SPRINGFIELD State MO Zip Code 65804-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OZARKS COCA-COLA Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.356850
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347544
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4009 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362504
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

B. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362505
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385815
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 118.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4010 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389179
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390204
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390206
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4011 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390220
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390221
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RICE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 PLUMAS STREET
 City SUSANVILLE State CA Zip Code 96130-4861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA ARMY DEPOT Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419865
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4012 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5960 CLUB HOUSE DRIVE
708

City DAVENPORT State IA Zip Code 52807-7600

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.350681

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RICH, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5960 CLUB HOUSE DRIVE
708

City DAVENPORT State IA Zip Code 52807-7600

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2016

Transaction ID : SA11A.359801

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RICH, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5960 CLUB HOUSE DRIVE
708

City DAVENPORT State IA Zip Code 52807-7600

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372107

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4013 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5960 CLUB HOUSE DRIVE
 708
 City DAVENPORT State IA Zip Code 52807-7600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399243
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICH, NORMAN, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 WATERGATE DRIVE
 UNIT 1502
 City SARASOTA State FL Zip Code 34236-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361245
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICH, NORMAN, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 WATERGATE DRIVE
 UNIT 1502
 City SARASOTA State FL Zip Code 34236-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406993
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4014 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, STEPHANIE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BARKERS POINT RD
 City PORT WASHINGTON State NY Zip Code 11050-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344310
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICH, STEPHANIE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BARKERS POINT RD
 City PORT WASHINGTON State NY Zip Code 11050-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.347553
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICH, STEPHANIE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BARKERS POINT RD
 City PORT WASHINGTON State NY Zip Code 11050-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384424
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4015 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, STEPHANIE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BARKERS POINT RD
 City PORT WASHINGTON State NY Zip Code 11050-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396628
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RICH, STEPHANIE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BARKERS POINT RD
 City PORT WASHINGTON State NY Zip Code 11050-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401660
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. RICH, STEPHANIE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 BARKERS POINT RD
 City PORT WASHINGTON State NY Zip Code 11050-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403141
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4016 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICH, WILLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 ST ANDREWS CT

City CLAYTON	State GA	Zip Code 30525-5551
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2016

Transaction ID : SA11A.397987

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RICHARDSON, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1301 TRIANO CIRCLE

City VENICE	State FL	Zip Code 34292-6437
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2016

Transaction ID : SA11A.349933

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RICHARDS, JIM, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6438 NOBLE DR

City MCLEAN	State VA	Zip Code 22101-5263
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CORNERSTONE GOVERNMENT AFFAIRS	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2016

Transaction ID : SA11A.346069

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4017 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 HAMPTON LANE

City BLUE BELL	State PA	Zip Code 19422-2605
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.396563

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RICHARDSON, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2507 NO. BEACHWOOD DR., #3

City LOS ANGELES	State CA	Zip Code 90068-2346
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JUDY RICHARDSON	Occupation (for Individual) PSYCHOTHERAPIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362386

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RICHARDSON, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2507 NO. BEACHWOOD DR., #3

City LOS ANGELES	State CA	Zip Code 90068-2346
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JUDY RICHARDSON	Occupation (for Individual) PSYCHOTHERAPIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394507

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4018 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDSON, MAURICE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 HIDDEN BRANCHES CIR
 City ATLANTA State GA Zip Code 30338-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382984
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICHARDSON, MAURICE, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5100 HIDDEN BRANCHES CIR
 City ATLANTA State GA Zip Code 30338-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382985
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICHARDS, REBEKAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 ROBERT CIRCLE
 City FARMINGTON State UT Zip Code 84025-4304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.357722
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4019 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 S BAY SHORE BLVD
 City GILBERT State AZ Zip Code 85233-6156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348721
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RICHARDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 S BAY SHORE BLVD
 City GILBERT State AZ Zip Code 85233-6156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370156
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHARDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 S BAY SHORE BLVD
 City GILBERT State AZ Zip Code 85233-6156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382607
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4020 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 362 S BAY SHORE BLVD

City GILBERT	State AZ	Zip Code 85233-6156
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390121

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RICHARDS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 362 S BAY SHORE BLVD

City GILBERT	State AZ	Zip Code 85233-6156
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.404474

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. RICHARDS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 362 S BAY SHORE BLVD

City GILBERT	State AZ	Zip Code 85233-6156
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405601

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4021 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHARDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 362 S BAY SHORE BLVD
 City GILBERT State AZ Zip Code 85233-6156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405604
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349140
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358167
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4022 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378781
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380290
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4023 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380291
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382371
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382373
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4024 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398140
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399634
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405897
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4025 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405899
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409988
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411669
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4026 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412013
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413236
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHERT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34180 HURON RIVER DRIVE
 City NEW BOSTON State MI Zip Code 48164-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2425.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413278
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4027 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHESON, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6086 COVINGTON ROAD
 City COLUMBIA State MD Zip Code 21044-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417130
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.356468
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6900 HELENA DR NE
 City BREMERTON State WA Zip Code 98311-9534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF NAVY Occupation (for Individual) HR SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382852
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4028 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHINS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6900 HELENA DR NE

City BREMERTON	State WA	Zip Code 98311-9534
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF NAVY	Occupation (for Individual) HR SPECIALIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.382853

Amount of Each Receipt this Period
5.00

Memo Item
CONTRIBUTION

B. RICHINS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6900 HELENA DR NE

City BREMERTON	State WA	Zip Code 98311-9534
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF NAVY	Occupation (for Individual) HR SPECIALIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419721

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RICHMOND, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10228 NE 52ND

City KIRKLAND	State WA	Zip Code 98033-7605
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390315

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	205.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4029 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHMOND, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10228 NE 52ND
 City KIRKLAND State WA Zip Code 98033-7605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404458
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RICHMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 EAST LAKE SHORE DRIVE 301
 City CHICAGO State IL Zip Code 60611-1900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411229
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. RICHTER, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11703 EMPRESSS OAKS CT
 City HOUSTON State TX Zip Code 77082-6842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BBMP, LLC Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.356499
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4030 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350852
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355565
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359729
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4031 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363874
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.366959
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370001
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4032 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374613
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378784
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402298
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4033 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICHTER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5737 CLEVEDON LN
 City OSHKOSH State WI Zip Code 54904-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420049
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RICKERT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 MOUNT MADONNA ROAD
 City WATSONVILLE State CA Zip Code 95076-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406859
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. RICKER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 HAGGERS LANE
 City FAIR HAVEN State NJ Zip Code 07704-3310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MBRE REAL ESTATE Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366714
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4034 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICKERSHAUSER, PETER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 ADAMS STREET

City DENVER	State CO	Zip Code 80206-4412
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387209

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RICKERSHAUSER, PETER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 ADAMS STREET

City DENVER	State CO	Zip Code 80206-4412
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.404445

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RICKERSHAUSER, PETER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 545 ADAMS STREET

City DENVER	State CO	Zip Code 80206-4412
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
532.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405689

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4035 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RICKERSHAUSER, PETER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 545 ADAMS STREET

City DENVER	State CO	Zip Code 80206-4412
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422287

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RIDDICK, MAX, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3618 TIGER POINT BLVD.

City GULF BREEZE	State FL	Zip Code 32563-3443
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359083

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

C. RIDDICK, MAX, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3618 TIGER POINT BLVD.

City GULF BREEZE	State FL	Zip Code 32563-3443
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359084

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4036 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDDICK, MAX, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3618 TIGER POINT BLVD.
 City GULF BREEZE State FL Zip Code 32563-3443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372466
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RIDDICK, MAX, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3618 TIGER POINT BLVD.
 City GULF BREEZE State FL Zip Code 32563-3443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372477
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RIDDICK, MAX, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3618 TIGER POINT BLVD.
 City GULF BREEZE State FL Zip Code 32563-3443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372479
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4037 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDGE, EDWARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1642 GIBSON ROAD

City BENSALEM	State PA	Zip Code 19020-3008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MOBILE HOME PARK OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.381089

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

B. RIDGE, EDWARD, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1642 GIBSON ROAD

City BENSALEM	State PA	Zip Code 19020-3008
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MOBILE HOME PARK OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.414637

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

C. RIDLEY, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 RANKIN ST

City DALLAS	State TX	Zip Code 75205-1208
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SPEAKER/CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 813.00

Date of Receipt
 07 / 18 / 2016
Transaction ID : SA11A.348824

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4038 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDLEY, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 RANKIN ST
 City DALLAS State TX Zip Code 75205-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358359
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RIDLEY, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 RANKIN ST
 City DALLAS State TX Zip Code 75205-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358360
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RIDLEY, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 RANKIN ST
 City DALLAS State TX Zip Code 75205-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359932
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4039 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3537 RANKIN ST
City DALLAS State TX Zip Code 75205-1208
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 813.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363854
Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3537 RANKIN ST
City DALLAS State TX Zip Code 75205-1208
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 813.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384743
Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. RIDLEY, DAVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3537 RANKIN ST
City DALLAS State TX Zip Code 75205-1208
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 813.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388102
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	218.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4040 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDLEY, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 RANKIN ST
 City DALLAS State TX Zip Code 75205-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392145
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. RIDLEY, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 RANKIN ST
 City DALLAS State TX Zip Code 75205-1208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEAKER/CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 813.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419556
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. RIEBE, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 E LAKE JASMINE CIR UNIT 106
 City VERO BEACH State FL Zip Code 32962-5730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350510
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	143.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4041 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2016

Transaction ID : SA11A.366674

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2016

Transaction ID : SA11A.376100

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2016

Transaction ID : SA11A.391051

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4042 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391052

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394058

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396808

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4043 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397978

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400842

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. RIEBE, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 E LAKE JASMINE CIR
UNIT 106

City VERO BEACH State FL Zip Code 32962-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405104

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4044 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIECKHOFF, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 134 N MELBORN STREET

City DEARBORN	State MI	Zip Code 48128-1717
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397287

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. RIEDER, GEOFF, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1607

City ALBUQUERQUE	State NM	Zip Code 87103-1607
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348700

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RIEDER, GEOFF, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1607

City ALBUQUERQUE	State NM	Zip Code 87103-1607
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355587

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4045 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362999
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607
 City ALBUQUERQUE State NM Zip Code 87103-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379878
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4046 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607

City ALBUQUERQUE	State NM	Zip Code 87103-1607
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396945

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607

City ALBUQUERQUE	State NM	Zip Code 87103-1607
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408677

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RIEDER, GEOFF, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1607

City ALBUQUERQUE	State NM	Zip Code 87103-1607
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOSTER, RIEDER & JACKSON, PC	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418770

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4047 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIESENBECK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1508 LAKE HOLIDAY DR

City SANDWICH	State IL	Zip Code 60548-9305
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347521

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RIESENBECK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1508 LAKE HOLIDAY DR

City SANDWICH	State IL	Zip Code 60548-9305
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418846

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RIESENBECK, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1508 LAKE HOLIDAY DR

City SANDWICH	State IL	Zip Code 60548-9305
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418851

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4048 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RIESENBECK, MICHAEL, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016 Transaction ID : SA11A.420252
Mailing Address 1508 LAKE HOLIDAY DR		Amount of Each Receipt this Period 100.00
City SANDWICH	State IL	Zip Code 60548-9305
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RIESENBECK, MICHAEL, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016 Transaction ID : SA11A.420254
Mailing Address 1508 LAKE HOLIDAY DR		Amount of Each Receipt this Period 100.00
City SANDWICH	State IL	Zip Code 60548-9305
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RIESENBECK, MICHAEL, , ,		Date of Receipt MM / DD / YYYY 09 / 29 / 2016 Transaction ID : SA11A.420255
Mailing Address 1508 LAKE HOLIDAY DR		Amount of Each Receipt this Period 100.00
City SANDWICH	State IL	Zip Code 60548-9305
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4049 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIESENBECK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 LAKE HOLIDAY DR
 City SANDWICH State IL Zip Code 60548-9305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420256
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RIGGI, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 OLD GICK ROAD NA
 City SARATOGA SPRINGS State NY Zip Code 12866-9450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TURBINESERVICES,LTD. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348962
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RIGGI, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 OLD GICK ROAD NA
 City SARATOGA SPRINGS State NY Zip Code 12866-9450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TURBINESERVICES,LTD. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372746
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4050 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIGGI, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 OLD GICK ROAD
 NA
 City SARATOGA SPRINGS State NY Zip Code 12866-9450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TURBINESERVICES,LTD. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.401015
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RIGHT, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 654 MADISON AVE STE 602
 City NEW YORK State NY Zip Code 10065-8439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DOT Occupation (for Individual) COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401035
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. RIGSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9013 PONT CYPRSS DRIVE
 City ORLANDO State FL Zip Code 32836-5475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369371
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4051 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RILEY, A, D., ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 6543 BOONE AVNUE		Transaction ID : SA11A.381040
City BATON ROUGE	State LA	Zip Code 70808-5106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RIMMER, MARY, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016
Mailing Address 3120 CIRCA DE TIERRA		Transaction ID : SA11A.390554
City ENCINITAS	State CA	Zip Code 92024-6905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RIMMER, MARY, , ,		Date of Receipt MM / DD / YYYY 09 / 27 / 2016
Mailing Address 3120 CIRCA DE TIERRA		Transaction ID : SA11A.410464
City ENCINITAS	State CA	Zip Code 92024-6905
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4052 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIMMER, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3120 CIRCA DE TIERRA

City ENCINITAS	State CA	Zip Code 92024-6905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410476

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. RIMMER, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3120 CIRCA DE TIERRA

City ENCINITAS	State CA	Zip Code 92024-6905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417871

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RING, DAVID, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1489 CENTRE STREET

City NEWTON	State MA	Zip Code 02461-1200
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) APPLIED PLASTICS CO.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365184

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4053 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RING, DAVID, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1489 CENTRE STREET
 City NEWTON State MA Zip Code 02461-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLIED PLASTICS CO. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371356
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. RING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 EAST VIEJO
 City FRIENDSWOOD State TX Zip Code 77546-5549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEMLON Occupation (for Individual) ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.363036
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 EAST VIEJO
 City FRIENDSWOOD State TX Zip Code 77546-5549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEMLON Occupation (for Individual) ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393658
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5275.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4054 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT.
 City KINGS PARK State NY Zip Code 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346305
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT.
 City KINGS PARK State NY Zip Code 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RIPBERGER, BERNICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 CONTINENTAL DRIVE
 City ZIONSVILLE State IN Zip Code 46077-8749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397291
 Amount of Each Receipt this Period 700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4055 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RISCH, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3540 COLGATE AVE.
City DALLAS State TX Zip Code 75225-5009
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.357749
Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. RISCH, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3540 COLGATE AVE.
City DALLAS State TX Zip Code 75225-5009
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383090
Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. RISING, LAURIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 235 TRIMBLE CREST DR.
City ATLANTA State GA Zip Code 30342-2489
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349606
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4056 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RISING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 GARNET AVE
 City PORT ARTHUR State TX Zip Code 77640-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTION RESTORATION INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357578
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RISING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 GARNET AVE
 City PORT ARTHUR State TX Zip Code 77640-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTION RESTORATION INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368868
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RISING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 GARNET AVE
 City PORT ARTHUR State TX Zip Code 77640-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTION RESTORATION INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382808
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4057 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RISING, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6524 GARNET AVE
 City PORT ARTHUR State TX Zip Code 77640-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTION RESTORATION INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413036
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RISMILLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4021 GULF SHORE BOULEVARD N #1006
 City NAPLES State FL Zip Code 34103-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381510
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RISTKOK, TUULI-ANN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 W 16TH STREET APT 6J-N
 City NEW YORK State NY Zip Code 10011-6333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417431
 Amount of Each Receipt this Period 350.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4058 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RITCHIE, DANIEL, , ,		Date of Receipt MM / DD / YYYY 07 / 26 / 2016
Mailing Address 2200 S UNIVERSITY BOULEVARD, APT 5		Transaction ID : SA11A.354429
City DENVER	State CO	Zip Code 80210-4763
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. RITCHIE, LEE, R., MR.,		Date of Receipt MM / DD / YYYY 08 / 22 / 2016
Mailing Address 149 LOCUST FENCE RD		Transaction ID : SA11A.374059
City ST HELENA IS	State SC	Zip Code 29920-3029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. RITCHIE, LEE, R., MR.,		Date of Receipt MM / DD / YYYY 09 / 17 / 2016
Mailing Address 149 LOCUST FENCE RD		Transaction ID : SA11A.400144
City ST HELENA IS	State SC	Zip Code 29920-3029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	5200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4059 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.353013
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366348
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.374041
 Amount of Each Receipt this Period
 45.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4060 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.393844
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. RITCH, PHILIP, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO STREET
 City KAILUA State HI Zip Code 96734-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411740
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. RITTER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7700 WILSON RD.
 City WARRENTON State VA Zip Code 20186-7472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL ONE Occupation (for Individual) SR. IOS DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414124
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1065.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4061 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RITTENHOUSE, LOUIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 HIGH STREET
 City SANTA CRUZ State CA Zip Code 95060-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RITTENHOUSE BLDG INVESTMENT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381404
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. RIZZO, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6131 DORSETT PL
 City WILMINGTON State NC Zip Code 28403-0128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387945
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RIZZO, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6131 DORSETT PL
 City WILMINGTON State NC Zip Code 28403-0128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390179
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4062 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIZZO, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6131 DORSETT PL

City WILMINGTON	State NC	Zip Code 28403-0128
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405302

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RIZZO, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6131 DORSETT PL

City WILMINGTON	State NC	Zip Code 28403-0128
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415781

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RIZZO, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6131 DORSETT PL

City WILMINGTON	State NC	Zip Code 28403-0128
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420144

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4063 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROACH, JOHN, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1130 HILLPOINTE CIRCLE
 City BLOOMFIELD HILLS State MI Zip Code 48304-1514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402863
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ROBBINS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 AVALON RD
 City COLUMBUS State WI Zip Code 53925-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357388
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. ROBBINS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 AVALON RD
 City COLUMBUS State WI Zip Code 53925-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 731.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4064 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBBINS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 AVALON RD
 City COLUMBUS State WI Zip Code 53925-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370570
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROBBINS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 AVALON RD
 City COLUMBUS State WI Zip Code 53925-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413333
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROBBINS, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 AVALON RD
 City COLUMBUS State WI Zip Code 53925-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413346
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4065 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBBINS, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 EAST BEACH DR
 City BALD HEAD ISLAND State NC Zip Code 28461-5048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391110
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROBBINS, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 EAST BEACH DR
 City BALD HEAD ISLAND State NC Zip Code 28461-5048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405860
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROBBINS, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 EAST BEACH DR
 City BALD HEAD ISLAND State NC Zip Code 28461-5048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405862
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4066 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROBERTS, ARTHUR, , ,

Mailing Address 3202 WESTGATE LANE

City RICHARDSON	State TX	Zip Code 75082-3114
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.349538

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROBERTS, ARTHUR, , ,

Mailing Address 3202 WESTGATE LANE

City RICHARDSON	State TX	Zip Code 75082-3114
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016

Transaction ID : SA11A.392782

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROBERTSON, BRIAN, , ,

Mailing Address 31 CROSSWAY E

City BOHEMIA	State NY	Zip Code 11716-1204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHROCK IND. INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016

Transaction ID : SA11A.378921

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4067 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 329 VAUGHN ROBERTSON RD.
N/A

City STEENS	State MS	Zip Code 39766-9774
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		04		2016

Transaction ID : SA11A.344192

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ROBERTSON, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 329 VAUGHN ROBERTSON RD.
N/A

City STEENS	State MS	Zip Code 39766-9774
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347618

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

C. ROBERTSON, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 329 VAUGHN ROBERTSON RD.
N/A

City STEENS	State MS	Zip Code 39766-9774
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362444

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	127.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4068 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROBERTSON, CAROLYN, , ,

Mailing Address 329 VAUGHN ROBERTSON RD.
N/A

City STEENS	State MS	Zip Code 39766-9774
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
MM / DD / YYYY
09 / 04 / 2016

Transaction ID : SA11A.389182

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROBERTS, DAVID, , ,

Mailing Address 604 SOUTH WASHINGTON SQ.
303

City PHILADELPHIA	State PA	Zip Code 19106-4118
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348554

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROBERTS, DAVID, , ,

Mailing Address 604 SOUTH WASHINGTON SQ.
303

City PHILADELPHIA	State PA	Zip Code 19106-4118
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.362259

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4069 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 SOUTH WASHINGTON SQ.
 303
 City PHILADELPHIA State PA Zip Code 19106-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366723
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROBERTSON, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5221 SYLVAN ROAD
 City RICHMOND State VA Zip Code 23225-3041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCGUIRE WOODS LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379399
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROBERTS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 SOUTH WASHINGTON SQ.
 303
 City PHILADELPHIA State PA Zip Code 19106-4118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389151
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4070 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 604 SOUTH WASHINGTON SQ.
303

City PHILADELPHIA State PA Zip Code 19106-4118

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2016

Transaction ID : SA11A.394514

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. ROBERT, DIANE, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6406 SCENIC DRIVE

City YAKIMA State WA Zip Code 98908-2119

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364832

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ROBERT, DIANE, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6406 SCENIC DRIVE

City YAKIMA State WA Zip Code 98908-2119

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364833

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4071 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365695
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368107
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.393654
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4072 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2016
Transaction ID : SA11A.393697
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398778
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409315
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4073 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, DIANE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 SCENIC DRIVE
 City YAKIMA State WA Zip Code 98908-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413249
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROBERTSON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 E 21ST STREET
 City TULSA State OK Zip Code 74114-1209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356609
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROBERTSON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 E 21ST STREET
 City TULSA State OK Zip Code 74114-1209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394987
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4074 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 E 21ST STREET
 City TULSA State OK Zip Code 74114-1209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407112
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. ROBERTS, DOROTHY, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 LEMON RANCH ROAD
 City SANTA BARBARA State CA Zip Code 93108-2257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351159
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ROBERTS, DOROTHY, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 LEMON RANCH ROAD
 City SANTA BARBARA State CA Zip Code 93108-2257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.361035
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4075 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 APPIAN WAY
 City RIVERSIDE State CA Zip Code 92506-4555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355502
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROBERTS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 APPIAN WAY
 City RIVERSIDE State CA Zip Code 92506-4555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388739
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROBERTS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 APPIAN WAY
 City RIVERSIDE State CA Zip Code 92506-4555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388741
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4076 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6206 APPIAN WAY
 City RIVERSIDE State CA Zip Code 92506-4555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419313
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROBERTSON, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1862 HALEKOA DRIVE
 City HONOLULU State HI Zip Code 96821-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTSON & COMPANY Occupation (for Individual) BUSINESS CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366098
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. ROBERTSON, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1862 HALEKOA DRIVE
 City HONOLULU State HI Zip Code 96821-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTSON & COMPANY Occupation (for Individual) BUSINESS CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409623
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4077 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 WAKEFIELD DRIVE
 APT 2213
 City ASHEVILLE State NC Zip Code 28803-4153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.387672
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. ROBERTS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WILLIAMS WAY
 City OLD HICKORY State TN Zip Code 37138-1961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356232
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. ROBERTS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WILLIAMS WAY
 City OLD HICKORY State TN Zip Code 37138-1961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404772
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4078 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WILLIAMS WAY
 City OLD HICKORY State TN Zip Code 37138-1961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415562
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROBERTSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 JEWETT HILL RD
 City SHARON State CT Zip Code 06069-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364150
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. ROBERTSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 JEWETT HILL RD
 City SHARON State CT Zip Code 06069-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392194
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4079 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 JEWETT HILL RD
 City SHARON State CT Zip Code 06069-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403844
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROBERTSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 JEWETT HILL RD
 City SHARON State CT Zip Code 06069-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403850
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROBERTSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 JEWETT HILL RD
 City SHARON State CT Zip Code 06069-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403901
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4080 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTSON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 JEWETT HILL RD

City SHARON	State CT	Zip Code 06069-2135
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403906

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROBERTS, RICHARD, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1109 S BAY SHORE DR.

City VIRGINIA BEACH	State VA	Zip Code 23451-3807
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.347663

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. ROBERTS, RICHARD, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1109 S BAY SHORE DR.

City VIRGINIA BEACH	State VA	Zip Code 23451-3807
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354229

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4081 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 CENTENNIAL CT
 City DEERFIELD BEACH State FL Zip Code 33442-9135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368788
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROBERT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 CENTENNIAL CT
 City DEERFIELD BEACH State FL Zip Code 33442-9135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.379791
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROBERT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 CENTENNIAL CT
 City DEERFIELD BEACH State FL Zip Code 33442-9135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382201
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4082 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 CENTENNIAL CT
 City DEERFIELD BEACH State FL Zip Code 33442-9135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383857
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROBERT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 CENTENNIAL CT
 City DEERFIELD BEACH State FL Zip Code 33442-9135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383866
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROBERT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 CENTENNIAL CT
 City DEERFIELD BEACH State FL Zip Code 33442-9135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.393803
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4083 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 CENTENNIAL CT

City DEERFIELD BEACH	State FL	Zip Code 33442-9135
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.396694

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ROBERT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 CENTENNIAL CT

City DEERFIELD BEACH	State FL	Zip Code 33442-9135
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.396696

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ROBERT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 CENTENNIAL CT

City DEERFIELD BEACH	State FL	Zip Code 33442-9135
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1145.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402312

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4084 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROBERT, WILLIAM, , ,

Mailing Address **83 CENTENNIAL CT**

City DEERFIELD BEACH	State FL	Zip Code 33442-9135
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.414141

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROBERT, WILLIAM, , ,

Mailing Address **83 CENTENNIAL CT**

City DEERFIELD BEACH	State FL	Zip Code 33442-9135
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.418474

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROBERTS, WILLIAM, , ,

Mailing Address **8270 HUGH ALISON PLACE**

City SARASOTA	State FL	Zip Code 34240-8564
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.420171

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4085 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROBERT, WILLIAM, , ,

Mailing Address **83 CENTENNIAL CT**

City **DEERFIELD BEACH** State **FL** Zip Code **33442-9135**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1145.00**

Date of Receipt **09 / 30 / 2016**

Transaction ID : SA11A.422226

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROBERTSON, WILHELMINA, E., ,

Mailing Address **601 JEFFERSON STE 4000**

City **HOUSTON** State **TX** Zip Code **77002-7913**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **WESTVIEW DEVELOPMENT INC** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **30000.00**

Date of Receipt **09 / 30 / 2016**

Transaction ID : SA11A.421189

Amount of Each Receipt this Period **25000.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROBERTS, WILLIAM, G., MR.,

Mailing Address **5701 BURLESON OAKS DRIVE**

City **BURLESON** State **TX** Zip Code **76028-1827**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **735.00**

Date of Receipt **08 / 09 / 2016**

Transaction ID : SA11A.363534

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **25300.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4086 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, WILLIAM, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5701 BURLESON OAKS DRIVE
 City BURLESON State TX Zip Code 76028-1827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396282
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. ROBERTS, WILLIAM, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5701 BURLESON OAKS DRIVE
 City BURLESON State TX Zip Code 76028-1827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406820
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROBERTSON, WYNDHAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 CEDAR BERRY LANE
 City CHAPEL HILL State NC Zip Code 27517-7207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362804
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 635.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4087 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBICHAUD, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8130 INDIAN HILL ROAD
 City CINCINNATI State OH Zip Code 45243-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MALIBU GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383606
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ROBINSON, CARROLL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 164 CAMDEN DRIVE
 City BAL HARBOUR State FL Zip Code 33154-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 448.00

Date of Receipt **07 / 07 / 2016**
Transaction ID : SA11A.345968
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. ROBINSON, CARROLL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 164 CAMDEN DRIVE
 City BAL HARBOUR State FL Zip Code 33154-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 448.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.362773
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	380.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4088 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, CARROLL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 164 CAMDEN DRIVE
 City BAL HARBOUR State FL Zip Code 33154-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 448.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2016
Transaction ID : SA11A.363935
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. ROBINSON, CARROLL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 164 CAMDEN DRIVE
 City BAL HARBOUR State FL Zip Code 33154-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 448.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389852
 Amount of Each Receipt this Period
 42.00
 Memo Item
 CONTRIBUTION

C. ROBINSON, CARROLL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 164 CAMDEN DRIVE
 City BAL HARBOUR State FL Zip Code 33154-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 448.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390998
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 192.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4089 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2649 PINION PINE DR.

City CARSON CITY	State NV	Zip Code 89706-2346
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF NEVADA WATER RESOURCES	Occupation (for Individual) PROGRAMMER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
429.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350042

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ROBINSON, CLIFFORD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2649 PINION PINE DR.

City CARSON CITY	State NV	Zip Code 89706-2346
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF NEVADA WATER RESOURCES	Occupation (for Individual) PROGRAMMER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
429.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2016

Transaction ID : SA11A.354678

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ROBINSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 472

City BOULDER CREEK	State CA	Zip Code 95006-0472
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385838

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4090 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 ST. JAMES PARK
 City LOS ANGELES State CA Zip Code 90007-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.400360
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROBINSON, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 ST. JAMES PARK
 City LOS ANGELES State CA Zip Code 90007-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400726
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROBINSON, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 ST. JAMES PARK
 City LOS ANGELES State CA Zip Code 90007-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400727
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4091 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9556
 City AUSTIN State TX Zip Code 78766-9556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN WHITE LIME CO Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406707
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. ROBINSON, REBECCA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 S. LEXINGTON DR.
 City JANESVILLE State WI Zip Code 53545-4323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBINSON & PRIJIC Occupation (for Individual) BUSINESS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378889
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ROBINSON, RICHARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 POLO CLUB CIR
 City DENVER State CO Zip Code 80209-3307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEAN FOODS COMPANY Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.356859
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4092 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBINSON, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4931 IRELAND PLACE
 City RAPID CITY State SD Zip Code 57702-8333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388816
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. ROBINSON, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4931 IRELAND PLACE
 City RAPID CITY State SD Zip Code 57702-8333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.411677
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. ROBISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1129 GRANNY WHITE COURT
 City NASHVILLE State TN Zip Code 37204-4115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 07 / 23 / 2016
Transaction ID : SA11A.354682
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4093 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1129 GRANNY WHITE COURT
 City NASHVILLE State TN Zip Code 37204-4115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377435
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROBISON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1129 GRANNY WHITE COURT
 City NASHVILLE State TN Zip Code 37204-4115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405109
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROBISON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 662 SCENIC RANCH CIRCLE
 City FAIRVIEW State TX Zip Code 75069-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.362602
 Amount of Each Receipt this Period
 110.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4094 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBISON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 662 SCENIC RANCH CIRCLE
 City FAIRVIEW State TX Zip Code 75069-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROBLES, JOHANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17825 6TH AVENUE NORTH
 City PLYMOUTH State MN Zip Code 55447-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381854
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROBSON, EDWARD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9532 E RIGGS RD
 City SUN LAKES State AZ Zip Code 85248-7463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBSON COMMUNITIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367880
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4095 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBSON, EDWARD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9532 E RIGGS RD
 City SUN LAKES State AZ Zip Code 85248-7463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBSON COMMUNITIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391346
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. ROCKHOLD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5610 VINMAR AVE
 City RANCHO CUCAMONGA State CA Zip Code 91701-1828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352487
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROCKHOLD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5610 VINMAR AVE
 City RANCHO CUCAMONGA State CA Zip Code 91701-1828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375967
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4096 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROCKHOLD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5610 VINMAR AVE
 City RANCHO CUCAMONGA State CA Zip Code 91701-1828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401385
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RODACK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16051 COLLINS AVE 3502
 City SUNNY ISLES BEACH State FL Zip Code 33160-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396852
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RODACK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16051 COLLINS AVE 3502
 City SUNNY ISLES BEACH State FL Zip Code 33160-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401381
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4097 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RODDEY, JAMES, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 OAK ST
 City OAKMONT State PA Zip Code 15139-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAR CABLE ASSOCIATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.361546
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. RODEK, JEFFREY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7312 LAMBTON GREEN N
 City NEW ALBANY State OH Zip Code 43054-8086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSU Occupation (for Individual) SR. LECTURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379113
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. RODRIGUE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 WEST AVE N
 City MCCOMB State MS Zip Code 39648-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385093
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4098 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RODRIGUE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 WEST AVE N
 City MCOMB State MS Zip Code 39648-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391894
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RODRIGUE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 WEST AVE N
 City MCOMB State MS Zip Code 39648-2127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391895
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROE, JEFFREY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1904 36TH AVE W
 City SEATTLE State WA Zip Code 98199-3933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXIOM STRATEGIES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.367924
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4099 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 E. 27TH PLACE
 City TULSA State OK Zip Code 74114-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERITRUST CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403506
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ROEHRBEIN, HANS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2569 PRAIRIE VIEW
 City WINTER GARDEN State FL Zip Code 34787-5470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARRIOTT INTERNATIONAL Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413555
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROESSL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2048 NW 86TH WAY
 City CORAL SPRINGS State FL Zip Code 33071-6171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348347
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4100 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROESSL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2048 NW 86TH WAY

City CORAL SPRINGS	State FL	Zip Code 33071-6171
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380346

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ROESSL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2048 NW 86TH WAY

City CORAL SPRINGS	State FL	Zip Code 33071-6171
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380348

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ROGERS, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1088

City TONASKET	State WA	Zip Code 98855-1088
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
07 / 19 / 2016

Transaction ID : SA11A.349564

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4101 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1088
 City TONASKET State WA Zip Code 98855-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363800
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROGERS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1088
 City TONASKET State WA Zip Code 98855-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366804
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROGERS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1088
 City TONASKET State WA Zip Code 98855-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373294
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4102 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1088
 City TONASKET State WA Zip Code 98855-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.374943
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ROGERS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1088
 City TONASKET State WA Zip Code 98855-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391285
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROGERS, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14777 WHISPERING RIDGE RD
 City SAN DIEGO State CA Zip Code 92131-4261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IVERA MEDICAL CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412359
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4103 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344296
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344382
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.359025
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4104 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.364797
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 08 / 15 / 2016
Transaction ID : SA11A.366609
 Amount of Each Receipt this Period
 20.00
 Memo Item CONTRIBUTION

C. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 08 / 15 / 2016
Transaction ID : SA11A.369166
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4105 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.383183
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387856
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. ROGERS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 BALES AVENUE
 City WINSLOW State AZ Zip Code 86047-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **09 / 11 / 2016**
Transaction ID : SA11A.393686
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4106 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 BALES AVENUE

City WINSLOW	State AZ	Zip Code 86047-4412
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405384

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ROGERS, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7628 LAS PALMAS WAY

City JACKSONVILLE	State FL	Zip Code 32256-0200
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.373072

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. ROGERS, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7628 LAS PALMAS WAY

City JACKSONVILLE	State FL	Zip Code 32256-0200
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.373163

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4107 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7628 LAS PALMAS WAY
 City JACKSONVILLE State FL Zip Code 32256-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.373165
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROGERS, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7628 LAS PALMAS WAY
 City JACKSONVILLE State FL Zip Code 32256-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.404378
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROGERS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15941 GLEISLE WAY
 City FORT MYERS State FL Zip Code 33912-3924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364319
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4108 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348974
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372384
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372756
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4109 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387694
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398029
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399843
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4110 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404862
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404864
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412512
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4111 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 AVIATION BLVD
 City LINCOLN State CA Zip Code 95648-9317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RFC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412514
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROGERS, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 HIGH COUNTRY DR.
 City CARY State NC Zip Code 27513-3449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LITESOURCE Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350790
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ROGERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16251 DALLAS PARKWAY
 City ADDISON State TX Zip Code 75001-6801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARY KAY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2016
Transaction ID : SA11A.345259
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4112 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGERS, ROBERTA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14515 W GRANITE VALLEY DRIVE
 APT E567
 City SUN CITY WEST State AZ Zip Code 85375-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390829
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ROGERS, ROBERTA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14515 W GRANITE VALLEY DRIVE
 APT E567
 City SUN CITY WEST State AZ Zip Code 85375-6024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401756
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ROGLIANO, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 494 HOPE SPRINGS LANE
 City MANAKIN SABOT State VA Zip Code 23103-3109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NRI INVESTMENTS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365173
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4113 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGSTAD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 NEVIA WAY
 City LOUISVILLE State KY Zip Code 40220-5716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.347032
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROGSTAD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 NEVIA WAY
 City LOUISVILLE State KY Zip Code 40220-5716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351002
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROGSTAD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 NEVIA WAY
 City LOUISVILLE State KY Zip Code 40220-5716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351003
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4114 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROGSTAD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 NEVIA WAY
 City LOUISVILLE State KY Zip Code 40220-5716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361912
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROGSTAD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 NEVIA WAY
 City LOUISVILLE State KY Zip Code 40220-5716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361914
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROHAN, NAOMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 WEST SLOUP DRIVE
 City WAHOO State NE Zip Code 68066-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357202
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4115 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROHAN, NAOMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 WEST SLOUP DRIVE
 City WAHOO State NE Zip Code 68066-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.384963
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROHAN, NAOMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 WEST SLOUP DRIVE
 City WAHOO State NE Zip Code 68066-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394091
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROHAN, NAOMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 WEST SLOUP DRIVE
 City WAHOO State NE Zip Code 68066-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394093
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4116 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROHAN, NAOMI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 WEST SLOUP DRIVE

City WAHOO	State NE	Zip Code 68066-2509
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411422

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. ROHL, LOUIS, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 580 ALLVIEW TERRACE

City LAGUNA BEACH	State CA	Zip Code 92651-1552
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROHL LLC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.375022

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. ROJAS, ISABEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2721 ELDER RD
ELDER RD

City KATY	State TX	Zip Code 77493-1218
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11A.346934

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4117 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ROJAS, ISABEL, , ,			Date of Receipt
Mailing Address 2721 ELDER RD ELDER RD			<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2016"/>
City KATY	State TX	Zip Code 77493-1218	Transaction ID : SA11A.349344
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ROJAS, ISABEL, , ,			Date of Receipt
Mailing Address 2721 ELDER RD ELDER RD			<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City KATY	State TX	Zip Code 77493-1218	Transaction ID : SA11A.363118
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ROJAS, ISABEL, , ,			Date of Receipt
Mailing Address 2721 ELDER RD ELDER RD			<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2016"/>
City KATY	State TX	Zip Code 77493-1218	Transaction ID : SA11A.365754
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4118 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROJAS, ISABEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2721 ELDER RD
 ELDER RD
 City KATY State TX Zip Code 77493-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.393628
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ROJAS, ISABEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2721 ELDER RD
 ELDER RD
 City KATY State TX Zip Code 77493-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416859
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. ROJAS, ISABEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2721 ELDER RD
 ELDER RD
 City KATY State TX Zip Code 77493-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416862
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4119 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROJAS, ISABEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2721 ELDER RD
 ELDER RD
 City KATY State TX Zip Code 77493-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.416863
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 E SODERBERG RD (PO BOX 1358)
 City ALLYN State WA Zip Code 98524-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382536
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 E SODERBERG RD (PO BOX 1358)
 City ALLYN State WA Zip Code 98524-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394206
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4120 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 E SODERBERG RD (PO BOX 1358)
 City ALLYN State WA Zip Code 98524-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394220
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 E SODERBERG RD (PO BOX 1358)
 City ALLYN State WA Zip Code 98524-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398994
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 E SODERBERG RD (PO BOX 1358)
 City ALLYN State WA Zip Code 98524-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405690
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4121 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLFSRUD, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 E SODERBERG RD (PO BOX 1358)
 City ALLYN State WA Zip Code 98524-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405691
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROLLER, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2324 SHELTERWOOD DRIVE
 City KETTERING State OH Zip Code 45409-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383193
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROLLER, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2324 SHELTERWOOD DRIVE
 City KETTERING State OH Zip Code 45409-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383195
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4122 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLLER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2324 SHELTERWOOD DRIVE

City KETTERING	State OH	Zip Code 45409-1914
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

Date of Receipt
09 / 06 / 2016
Transaction ID : SA11A.390045

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. ROLLER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2324 SHELTERWOOD DRIVE

City KETTERING	State OH	Zip Code 45409-1914
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

Date of Receipt
09 / 25 / 2016
Transaction ID : SA11A.408344

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ROLLER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2324 SHELTERWOOD DRIVE

City KETTERING	State OH	Zip Code 45409-1914
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 375.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.422058

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4123 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLLO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 LONGROVE LN
 City DES PERES State MO Zip Code 63131-3954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357113
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ROMOFF, JEFFREY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3208 FOX RUN RD
 City ALLISON PARK State PA Zip Code 15101-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.346483
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. RONAYNE, JOHN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 923 PENNIMAN AVENUE
 City PLYMOUTH State MI Zip Code 48170-1623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.371371
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4124 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RONEY, LINCOLN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 THIRD COURT
 City CHESTER State NY Zip Code 10918-1105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METROPOLITAN COLLEGE OF NY Occupation (for Individual) COLLEGE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373477
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ROODHOUSE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 29TH STREET
 City BELLEVUE State WA Zip Code 98005-1649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378338
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROODHOUSE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 29TH STREET
 City BELLEVUE State WA Zip Code 98005-1649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401673
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4125 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROODHOUSE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 29TH STREET
 City BELLEVUE State WA Zip Code 98005-1649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407636
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROODHOUSE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 29TH STREET
 City BELLEVUE State WA Zip Code 98005-1649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418023
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROONEY, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12210 90TH AVE
 City CHIPPEWA FALLS State WI Zip Code 54729-6137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.384964
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4126 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROOPE, CALEB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 W STATE ST
 City EAGLE State ID Zip Code 83616-4906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PACIFIC COMPANIES Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395813
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. ROOT, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 ARMSTRONG DRIVE
 City GEORGETOWN State TX Zip Code 78633-5133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372282
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROOT, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 ARMSTRONG DRIVE
 City GEORGETOWN State TX Zip Code 78633-5133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382989
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4127 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROOT, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 ARMSTRONG DRIVE
 City GEORGETOWN State TX Zip Code 78633-5133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394326
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROOT, JAMES, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 ARMSTRONG DRIVE
 City GEORGETOWN State TX Zip Code 78633-5133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408399
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROOT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 POLARIS DRIVE
 City NEWPORT BEACH State CA Zip Code 92660-5724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350173
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4128 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROOT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 POLARIS DRIVE
 City NEWPORT BEACH State CA Zip Code 92660-5724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.387329
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROOT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 POLARIS DRIVE
 City NEWPORT BEACH State CA Zip Code 92660-5724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.387331
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ROOT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 POLARIS DRIVE
 City NEWPORT BEACH State CA Zip Code 92660-5724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405495
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4129 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROOT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 POLARIS DRIVE
 City NEWPORT BEACH State CA Zip Code 92660-5724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405498
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROPER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 ARAPAHOE AVENUE
 City BOULDER State CO Zip Code 80302-5821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351152
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. ROSBRUCH, RONALD, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 CHARMELE DR APT 912
 City MONMOUTH BEACH State NJ Zip Code 07750-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.356852
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4130 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, ANNE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2120 ROBINS :LANE SE
UNIT 31

City SALEM State OR Zip Code 97306-2621

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2016

Transaction ID : SA11A.349031

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. ROSE, ANNE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2120 ROBINS :LANE SE
UNIT 31

City SALEM State OR Zip Code 97306-2621

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.366553

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. ROSE, ANNE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2120 ROBINS :LANE SE
UNIT 31

City SALEM State OR Zip Code 97306-2621

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016

Transaction ID : SA11A.366569

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4131 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ROSE, ANNE, M., ,		Date of Receipt MM / DD / YYYY 08 / 19 / 2016
Mailing Address 2120 ROBINS :LANE SE UNIT 31		Transaction ID : SA11A.374137
City SALEM	State OR	Zip Code 97306-2621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ROSE, ANNE, M., ,		Date of Receipt MM / DD / YYYY 08 / 26 / 2016
Mailing Address 2120 ROBINS :LANE SE UNIT 31		Transaction ID : SA11A.379446
City SALEM	State OR	Zip Code 97306-2621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ROSE, ANNE, M., ,		Date of Receipt MM / DD / YYYY 08 / 26 / 2016
Mailing Address 2120 ROBINS :LANE SE UNIT 31		Transaction ID : SA11A.380319
City SALEM	State OR	Zip Code 97306-2621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4132 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 WEBSTER HEIGHTS DRIVE
 City GREEN BAY State WI Zip Code 54301-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365047
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROSE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 WEBSTER HEIGHTS DRIVE
 City GREEN BAY State WI Zip Code 54301-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393691
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROSE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MASSACHUSETTS AVE NW 301
 City WASHINGTON State DC Zip Code 20001-6600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST Occupation (for Individual) EXTERNAL AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403090
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4133 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSE, WILLIAM, S., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 93 HARBOUR PSGE

City HILTON HEAD	State SC	Zip Code 29926-1264
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCNAIR LAW FIRM	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.373792

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. ROSELLINI, CONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11084 SIERRA PALM COURT

City FORT MYERS	State FL	Zip Code 33966-5753
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.357294

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ROSELLINI, CONNIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11084 SIERRA PALM COURT

City FORT MYERS	State FL	Zip Code 33966-5753
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2016

Transaction ID : SA11A.382684

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4134 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSELLINI, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11084 SIERRA PALM COURT
 City FORT MYERS State FL Zip Code 33966-5753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413060
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROSENSTOCK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 KESSLER WOODS TRAIL
 City DALLAS State TX Zip Code 75208-5600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344418
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROSENBERG, DJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1434
 City NORTH BEND State WA Zip Code 98045-1434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1092.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344339
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 380.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4135 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROSENBERG, DJ, , ,

Mailing Address P.O. BOX 1434

City NORTH BEND	State WA	Zip Code 98045-1434
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1092.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344340

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROSENBERG, DJ, , ,

Mailing Address P.O. BOX 1434

City NORTH BEND	State WA	Zip Code 98045-1434
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1092.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344341

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROSENBERG, DJ, , ,

Mailing Address P.O. BOX 1434

City NORTH BEND	State WA	Zip Code 98045-1434
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1092.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357572

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	512.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4136 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENQUIST, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18007 W OCOTILLO AVE

City GOODYEAR	State AZ	Zip Code 85338-5072
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.385608

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ROSEN, IAN, KURT, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 440 MID OAK DRIVE

City NORTH MUSKEGON	State MI	Zip Code 49445-2726
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN GREASE STICK CO	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016

Transaction ID : SA11A.366347

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. ROSENFELD, LEA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7975 W 4TH ST

City LOS ANGELES	State CA	Zip Code 90048-4412
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LEA ROSENFELD	Occupation (for Individual) MS.
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.356259

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4137 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENFELD, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7975 W 4TH ST
 City LOS ANGELES State CA Zip Code 90048-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEA ROSENFELD Occupation (for Individual) MS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383011
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. ROSENFELD, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7975 W 4TH ST
 City LOS ANGELES State CA Zip Code 90048-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEA ROSENFELD Occupation (for Individual) MS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411284
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. ROSEN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 SPRINGHOUSE LANE
 City BLUE BELL State PA Zip Code 19422-2463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374379
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4138 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 13 / 2016
Transaction ID : SA11A.366840
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.370157
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384012
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4139 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384015
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394243
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403025
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 75.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4140 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403468
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406334
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411064
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4141 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418707
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. ROSEN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1246
 City MCLEAN State VA Zip Code 22101-1246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418712
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. ROSENBECK, RONALD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8662 INDIAN RIDGE DRIVE
 City WEST CHESTER State OH Zip Code 45069-4541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REPUBLIC WIRE INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.389047
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4142 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENBERG, RONALD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 WIND HAVEN WAY
 City VIENNA State VA Zip Code 22182-1965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396426
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ROSEN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 UPLAND ROAD UNIT 2
 City CAMBRIDGE State MA Zip Code 02140-2717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARVARD UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416070
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. ROSENBERG, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 768 W. SEDONA RIDGE PL
 City ORO VALLEY State AZ Zip Code 85755-6580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN ROSENBERG Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402655
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4143 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSENBERG, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 768 W. SEDONA RIDGE PL
 City ORO VALLEY State AZ Zip Code 85755-6580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUSAN ROSENBERG Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402663
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ROSS, BETTY JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9051 SAFARI BLF
 City LARUE State TX Zip Code 75770-5035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MED- LOGICS, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411734
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ROSS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 1ST AVE SE
 City DODGE CENTER State MN Zip Code 55927-9149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDM OF MN Occupation (for Individual) RDM OF MN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369987
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4144 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 LAW STREET
 303
 City HOUSTON State TX Zip Code 77005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359302
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ROSS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 LAW STREET
 303
 City HOUSTON State TX Zip Code 77005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400765
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. ROSS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 LAW STREET
 303
 City HOUSTON State TX Zip Code 77005-1171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400766
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4145 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROSS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2908 REDMONT PARK LANE
 City BIRMINGHAM State AL Zip Code 35205-2136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390771
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ROTH, D., W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 758 SOUTH ELIZABETH STREET
 City DENVER State CO Zip Code 80209-4713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361358
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. ROTH, D., W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 758 SOUTH ELIZABETH STREET
 City DENVER State CO Zip Code 80209-4713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377032
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4146 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROTH, DANIEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9222 SOUTH BELL AVENUE
 City CHICAGO State IL Zip Code 60643-6707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387568
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ROTH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 MOORINGS PARK DRIVE, APT 502
 City NAPLES State FL Zip Code 34105-2222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377586
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ROUFAL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1244 ARBOR RD APT A-312
 City WINSTON SALEM State NC Zip Code 27104-1142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349084
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4147 OF 5722
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ROUFAL, MARY, , ,		Date of Receipt MM / DD / YYYY 07 / 21 / 2016
Mailing Address 1244 ARBOR RD A PT A-312		Transaction ID : SA11A.352090
City WINSTON SALEM	State NC	Zip Code 27104-1142
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ROUFAL, MARY, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 1244 ARBOR RD A PT A-312		Transaction ID : SA11A.373356
City WINSTON SALEM	State NC	Zip Code 27104-1142
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ROUFAL, MARY, , ,		Date of Receipt MM / DD / YYYY 08 / 21 / 2016
Mailing Address 1244 ARBOR RD A PT A-312		Transaction ID : SA11A.375833
City WINSTON SALEM	State NC	Zip Code 27104-1142
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4148 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUFAL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1244 ARBOR RD
 A PT A-312
 City WINSTON SALEM State NC Zip Code 27104-1142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401422
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.379084
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2016
Transaction ID : SA11A.389094
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4149 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401547
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. ROUGH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 W. MILLING ST.
 City LANCASTER State CA Zip Code 93534-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LM Occupation (for Individual) SA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408982
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368263
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4150 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376046
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389392
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397617
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4151 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397620
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398091
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406365
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4152 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408303
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412354
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE #29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412519
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4153 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2459 FRANCISCAN DRIVE #29

City CLEARWATER State FL Zip Code 33763-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016

Transaction ID : SA11A.413979

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. ROUNDS, CARLTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2459 FRANCISCAN DRIVE #29

City CLEARWATER State FL Zip Code 33763-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016

Transaction ID : SA11A.414868

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. ROUNDS, DWIGHT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3461 ELIZABETH STREET

City JUPITER State FL Zip Code 33458-8762

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016

Transaction ID : SA11A.388659

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4154 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380123
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380124
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388113
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4155 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409008
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409199
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 S HERITAGE CREEK WAY
 City SAINT AUGUSTINE State FL Zip Code 32084-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419298
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4156 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROUNTREE, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2337 HENRIETTA AVE.
 City LA CRESCENTA State CA Zip Code 91214-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROUNTREE GLASS Occupation (for Individual) GLASS CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412888
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ROWE, JOHN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 805398
 City CHICAGO State IL Zip Code 60680-4183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379104
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. ROWE, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 EAST E STREET
 City ENCINITAS State CA Zip Code 92024-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361169
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4157 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROWE, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 EAST E STREET
 City ENCINITAS State CA Zip Code 92024-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412235
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROWE, RAYMOND, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 EAST E STREET
 City ENCINITAS State CA Zip Code 92024-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412254
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368119
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4158 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384427
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. ROYAL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3223 FLORENCE AVE
 City TULSA State OK Zip Code 74105-2409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAGHORN PETROLEUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421890
 Amount of Each Receipt this Period
 300.00
 Memo Item
CONTRIBUTION

C. ROYER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 UPTOWN PARK BLVD.
 232
 City HOUSTON State TX Zip Code 77056-3251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390699
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4159 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348379
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396711
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408321
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4160 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408322
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUCKLE, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 S. BROOKSIDE TERRACE
 City TACOMA State WA Zip Code 98465-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421967
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUDI, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 532 SUSAN RD.
 City ST. LOUIS State MO Zip Code 63129-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364958
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4161 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RUDI, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 532 SUSAN RD.
 City ST. LOUIS State MO Zip Code 63129-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386240
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. RUDI, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 532 SUSAN RD.
 City ST. LOUIS State MO Zip Code 63129-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386244
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. RUDMAN, FRANK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6501 NE 2ND COURT
 City MIAMI State FL Zip Code 33138-6038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.369486
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4162 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUDOLF, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11320 CARTHAGE PIKE
 City KNIGHTSTOWN State IN Zip Code 46148-9775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **07 / 23 / 2016**
Transaction ID : SA11A.354629
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

B. RUDOLF, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11320 CARTHAGE PIKE
 City KNIGHTSTOWN State IN Zip Code 46148-9775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.385051
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

C. RUDOLF, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11320 CARTHAGE PIKE
 City KNIGHTSTOWN State IN Zip Code 46148-9775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.396768
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4163 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RUDOLF, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11320 CARTHAGE PIKE
 City KNIGHTSTOWN State IN Zip Code 46148-9775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405789
 Amount of Each Receipt this Period 70.00
 Memo Item CONTRIBUTION

B. RUE, KATHARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 JEFFREY COURT
 City SOMERVILLE State NJ Zip Code 08876-3611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408857
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. RUE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 CRANBURY NECK RD
 City CRANBURY State NJ Zip Code 08512-2801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419649
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2320.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4164 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUF, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20525 NORDHOFF ST.

City CHATSWORTH	State CA	Zip Code 91311-6100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUMBER CITY CORP.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354461

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RUF, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20525 NORDHOFF ST.

City CHATSWORTH	State CA	Zip Code 91311-6100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUMBER CITY CORP.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.360174

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RUF, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20525 NORDHOFF ST.

City CHATSWORTH	State CA	Zip Code 91311-6100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUMBER CITY CORP.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364776

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4165 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369985
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369996
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369998
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4166 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUF, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20525 NORDHOFF ST.

City CHATSWORTH	State CA	Zip Code 91311-6100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUMBER CITY CORP.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11A.389261

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RUF, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20525 NORDHOFF ST.

City CHATSWORTH	State CA	Zip Code 91311-6100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUMBER CITY CORP.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.393817

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. RUF, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20525 NORDHOFF ST.

City CHATSWORTH	State CA	Zip Code 91311-6100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUMBER CITY CORP.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394037

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4167 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422797
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. RUF, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20525 NORDHOFF ST.
 City CHATSWORTH State CA Zip Code 91311-6100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMBER CITY CORP. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.423112
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

C. RUFFIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 IVYBRIDGE DRIVE
 City LEXINGTON State KY Zip Code 40515-1176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMR MANAGEMENT SERVICES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349200
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4168 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUFFIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 IVYBRIDGE DRIVE
 City LEXINGTON State KY Zip Code 40515-1176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMR MANAGEMENT SERVICES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374750
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RUFFIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 IVYBRIDGE DRIVE
 City LEXINGTON State KY Zip Code 40515-1176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMR MANAGEMENT SERVICES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399563
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUFFIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 IVYBRIDGE DRIVE
 City LEXINGTON State KY Zip Code 40515-1176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMR MANAGEMENT SERVICES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420195
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4169 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUFFIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5024 IVYBRIDGE DRIVE

City LEXINGTON	State KY	Zip Code 40515-1176
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) AMR MANAGEMENT SERVICES		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00

Date of Receipt
09 / 29 / 2016
Transaction ID : SA11A.420198

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. RUFFNER, B W, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9 GRAYSWOOD HILL RD

City SIGNAL MOUNTAIN	State TN	Zip Code 37377-2317
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.374374

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RUHL, SUSAN, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1HOLLY HILL RD

City ASHEVILLE	State NC	Zip Code 28803-3114
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
08 / 24 / 2016
Transaction ID : SA11A.380163

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4170 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUHL, SUSAN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1HOLLY HILL RD
 City ASHEVILLE State NC Zip Code 28803-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385978
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RUHL, SUSAN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1HOLLY HILL RD
 City ASHEVILLE State NC Zip Code 28803-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385988
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RUIZ, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 EAST 20 ST
 6 FL
 City NEW YORK State NY Zip Code 10003-1315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEM FIRE PREVENTION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359695
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4171 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUIZ, JOSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 EAST 20 ST
6 FL

City NEW YORK State NY Zip Code 10003-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEM FIRE PREVENTION Occupation (for Individual) ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386896

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. RUIZ, JOSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 EAST 20 ST
6 FL

City NEW YORK State NY Zip Code 10003-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JEM FIRE PREVENTION Occupation (for Individual) ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388300

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. RULE, ADRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 PHEASANT RUN

City CHAGRIN FALLS State OH Zip Code 44022-2990

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368768

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1075.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4172 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350222
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370483
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376197
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4173 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376198
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388562
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388563
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4174 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408931
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4175 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408933
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408934
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUNALDUE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 PLANTATION DR
 City SOUTHERN PINES State NC Zip Code 28387-2967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410272
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4176 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNNEBOHM, NICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3177 S. 375 E.
 City SHELBYVILLE State IN Zip Code 46176-9245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUNNEBOHM CONSTR. CO. INC Occupation (for Individual) GEN. CONTRACTOR SEMI RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3700.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387885
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. RUNNEBOHM, NICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3177 S. 375 E.
 City SHELBYVILLE State IN Zip Code 46176-9245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUNNEBOHM CONSTR. CO. INC Occupation (for Individual) GEN. CONTRACTOR SEMI RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3700.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412766
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. RUNNOE, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4322 PLANTATION CT
 City DE PERE State WI Zip Code 54115-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MAIL HAUS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386857
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4177 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNNOE, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4322 PLANTATION CT
 City DE PERE State WI Zip Code 54115-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MAIL HAUS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419443
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RUNYON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 PEARTREE
 City CLARKSVILLE State TN Zip Code 37043-4672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350840
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUNYON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 PEARTREE
 City CLARKSVILLE State TN Zip Code 37043-4672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382556
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4178 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNYON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 PEARTREE
 City CLARKSVILLE State TN Zip Code 37043-4672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RUPAR, SYDNEY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 GRAY LYNN DR
 City WALLA WALLA State WA Zip Code 99362-9282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367949
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 09 / 2016
Transaction ID : SA11A.346699
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2850.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4179 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363895
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370004
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380105
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4180 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382870
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RUPPRECHT, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ROYALE CT
 City TROY State NY Zip Code 12180-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392129
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RUSH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11707 LANDINGS DRIVE
 City INDIANAPOLIS State IN Zip Code 46256-9437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401090
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4181 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSHING, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 DAMONTE RANCH PARKWAY B499

City RENO	State NV	Zip Code 89521-1907
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.375031

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. RUSS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 THE POINT LANE

City STEVENSVILLE	State MD	Zip Code 21666-3977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MTBMA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353461

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RUSS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 THE POINT LANE

City STEVENSVILLE	State MD	Zip Code 21666-3977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MTBMA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370351

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4182 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 THE POINT LANE

City STEVENSVILLE	State MD	Zip Code 21666-3977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MTBMA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374622

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RUSS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 THE POINT LANE

City STEVENSVILLE	State MD	Zip Code 21666-3977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MTBMA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382169

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RUSS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 THE POINT LANE

City STEVENSVILLE	State MD	Zip Code 21666-3977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MTBMA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392085

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4183 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 THE POINT LANE
 City STEVENSVILLE State MD Zip Code 21666-3977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MTBMA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392086
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RUSS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 THE POINT LANE
 City STEVENSVILLE State MD Zip Code 21666-3977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MTBMA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396197
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RUSS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 THE POINT LANE
 City STEVENSVILLE State MD Zip Code 21666-3977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MTBMA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403897
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4184 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, BILLIE, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 JASMINE DR
 City BEAUMONT State TX Zip Code 77706-4417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376491
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. RUSSELL, DAVID, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2113 WILSHIRE DRIVE
 City ENID State OK Zip Code 73703-6622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.346241
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. RUSSELL, LUTHER, J.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17715 N CACHE BAR CT
 City HAYDEN State ID Zip Code 83835-7943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.398473
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4185 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 LINDEN STREET
 City WESTWOOD State MA Zip Code 02090-3305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415671
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RUSSELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 LINDEN STREET
 City WESTWOOD State MA Zip Code 02090-3305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415672
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RUSSELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 LINDEN STREET
 City WESTWOOD State MA Zip Code 02090-3305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420097
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4186 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, THOMAS, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12607 S 12TH STREET

City JENKS	State OK	Zip Code 74037-4993
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245800.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.376638

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. RUSSELL, THOMAS, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12607 S 12TH STREET

City JENKS	State OK	Zip Code 74037-4993
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245800.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417081

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. RUSSELL, THOMAS, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12607 S 12TH STREET

City JENKS	State OK	Zip Code 74037-4993
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245800.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417180

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4187 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSELL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3440 SOUTH LOOP W
 City HOUSTON State TX Zip Code 77025-5205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346963
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RUSSELL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3440 SOUTH LOOP W
 City HOUSTON State TX Zip Code 77025-5205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363916
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RUSSELL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3440 SOUTH LOOP W
 City HOUSTON State TX Zip Code 77025-5205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392153
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4188 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUSSO, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 NORTH WESTLAKE BLVD
 SUITE 130
 City WESTLAKE VILLAGE State CA Zip Code 91362-7052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLASSIC FINANCIAL Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353589
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RUST, LYMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CANDLEWYCK DR
 City HENDERSON State NV Zip Code 89052-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352095
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. RUST, LYMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CANDLEWYCK DR
 City HENDERSON State NV Zip Code 89052-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362302
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4189 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUST, LYMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CANDLEWYCK DR
 City HENDERSON State NV Zip Code 89052-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383640
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. RUST, LYMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CANDLEWYCK DR
 City HENDERSON State NV Zip Code 89052-6654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419445
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. RUST, PATRICIA, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 N WEST TEMPLE 610
 City SALT LAKE CITY State UT Zip Code 84103-1564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411558
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4190 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTHERFORD, WARREN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8600 SKYLINE DRIVE
 3213
 City DALLAS State TX Zip Code 75243-4198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.354065
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. RUTHERFORD, WARREN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8600 SKYLINE DRIVE
 3213
 City DALLAS State TX Zip Code 75243-4198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364809
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. RUTHERFORD, WARREN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8600 SKYLINE DRIVE
 3213
 City DALLAS State TX Zip Code 75243-4198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366675
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4191 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTHERFORD, WARREN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8600 SKYLINE DRIVE
3213

City DALLAS State TX Zip Code 75243-4198

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.383637

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RUTHERFORD, WARREN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8600 SKYLINE DRIVE
3213

City DALLAS State TX Zip Code 75243-4198

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.415261

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RUTLEDGE, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16760 QUEEN ANN DRIVE

City BROOKFIELD State WI Zip Code 53005-2182

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST AIRLINES Occupation (for Individual) GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.359639

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4192 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTLEDGE, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16760 QUEEN ANN DRIVE

City BROOKFIELD	State WI	Zip Code 53005-2182
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST AIRLINES	Occupation (for Individual) GENERAL MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359641

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. RUTLEDGE, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16760 QUEEN ANN DRIVE

City BROOKFIELD	State WI	Zip Code 53005-2182
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST AIRLINES	Occupation (for Individual) GENERAL MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.396727

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RUTLEDGE, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16760 QUEEN ANN DRIVE

City BROOKFIELD	State WI	Zip Code 53005-2182
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST AIRLINES	Occupation (for Individual) GENERAL MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405523

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4193 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTLEDGE, DOUG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16760 QUEEN ANN DRIVE

City BROOKFIELD	State WI	Zip Code 53005-2182
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST AIRLINES	Occupation (for Individual) GENERAL MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405524

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RUTLEDGE, PUD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1132

City SAN MARCOS	State TX	Zip Code 78667-1132
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391702

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RUTLEDGE, PUD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1132

City SAN MARCOS	State TX	Zip Code 78667-1132
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.408041

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4194 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUTLEDGE, PUD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1132

City SAN MARCOS	State TX	Zip Code 78667-1132
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016
Transaction ID : SA11A.410110

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. RUTTLE, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2640 TRADER ROAD #7959

City JACKSON	State WY	Zip Code 83001-8321
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2016
Transaction ID : SA11A.394919

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. RYAN, CHRISTEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 834 SW KINGS BAY DRIVE

City CRYSTAL RIVER	State FL	Zip Code 34429-4651
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2016
Transaction ID : SA11A.374083

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4195 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN, DAN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 BYRON ST

City WATERBURY	State CT	Zip Code 06704-1702
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349320

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. RYAN, DAN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 BYRON ST

City WATERBURY	State CT	Zip Code 06704-1702
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350213

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. RYAN, DAN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 BYRON ST

City WATERBURY	State CT	Zip Code 06704-1702
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365829

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4196 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN, DAN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 BYRON ST
City WATERBURY State CT Zip Code 06704-1702
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387981
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. RYAN, KEVIN, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 317 SIDLEY ROAD
City MALVERN State PA Zip Code 19355-1132
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391704
Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. RYAN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1602 WINNERS CUP CR
City ST. CHARLES State IL Zip Code 60174-5846
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) LEAN ADVANTAGE INC Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390242
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4197 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1602 WINNERS CUP CR
 City ST. CHARLES State IL Zip Code 60174-5846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEAN ADVANTAGE INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396843
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. RYAN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1602 WINNERS CUP CR
 City ST. CHARLES State IL Zip Code 60174-5846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEAN ADVANTAGE INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408074
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. RYAN, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 32410
 City TUCSON State AZ Zip Code 85751-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365373
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4198 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 32410
 City TUCSON State AZ Zip Code 85751-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396922
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RYAN, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 32410
 City TUCSON State AZ Zip Code 85751-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406860
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. RYBACK, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5026 CHANDLER ROAD
 City QUINCY State CA Zip Code 95971-9654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLUMAS BANK Occupation (for Individual) COMMUNITY BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358543
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4199 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYTAND, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1169
 City ANACORTES State WA Zip Code 98221-6169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANSPAC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402739
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. S ULLIVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 FOX CIRCLE
 City LARKSPUR State CO Zip Code 80118-9106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356197
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. S ULLIVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 FOX CIRCLE
 City LARKSPUR State CO Zip Code 80118-9106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373358
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4200 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. S ULLIVAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 FOX CIRCLE

City LARKSPUR	State CO	Zip Code 80118-9106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374286

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. S ULLIVAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 FOX CIRCLE

City LARKSPUR	State CO	Zip Code 80118-9106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.380198

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. S ULLIVAN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 FOX CIRCLE

City LARKSPUR	State CO	Zip Code 80118-9106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385828

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4201 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. S ULLIVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 FOX CIRCLE
 City LARKSPUR State CO Zip Code 80118-9106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.391984
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. S ULLIVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 FOX CIRCLE
 City LARKSPUR State CO Zip Code 80118-9106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.391985
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. S ULLIVAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 FOX CIRCLE
 City LARKSPUR State CO Zip Code 80118-9106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399242
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4202 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SABA, CAMILE, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18 DELLWOOD CIRCLE

City BRONXVILLE	State NY	Zip Code 10708-2008
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLAYAN AMERICA	Occupation (for Individual) INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2016

Transaction ID : SA11A.388987

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. SABOTT, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9615 AVOCET LN

City LAFAYETTE	State CO	Zip Code 80026-9737
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2016

Transaction ID : SA11A.353176

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SABOTT, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9615 AVOCET LN

City LAFAYETTE	State CO	Zip Code 80026-9737
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2016

Transaction ID : SA11A.359458

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4203 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SABOTT, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9615 AVOCET LN
 City LAFAYETTE State CO Zip Code 80026-9737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11A.364893
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SABOTT, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9615 AVOCET LN
 City LAFAYETTE State CO Zip Code 80026-9737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382028
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SABOTT, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9615 AVOCET LN
 City LAFAYETTE State CO Zip Code 80026-9737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 09 / 19 / 2016
Transaction ID : SA11A.399293
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4204 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SACKAR, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 W GEORGE STREET, SUITE 207
 City CHICAGO State IL Zip Code 60657-5877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414764
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. SADLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5730 NORTH FAIRFIELD AVENUE
 City CHICAGO State IL Zip Code 60659-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359860
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. SADLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5730 NORTH FAIRFIELD AVENUE
 City CHICAGO State IL Zip Code 60659-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368298
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 384.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4205 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SADLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5730 NORTH FAIRFIELD AVENUE
 City CHICAGO State IL Zip Code 60659-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384791
 Amount of Each Receipt this Period
 59.00
 Memo Item CONTRIBUTION

B. SADLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5730 NORTH FAIRFIELD AVENUE
 City CHICAGO State IL Zip Code 60659-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394227
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. SADLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5730 NORTH FAIRFIELD AVENUE
 City CHICAGO State IL Zip Code 60659-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408881
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 109.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4206 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SADLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5730 NORTH FAIRFIELD AVENUE
 City CHICAGO State IL Zip Code 60659-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419603
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

B. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PLACE
 City MASPETH State NY Zip Code 11378-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.351039
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PLACE
 City MASPETH State NY Zip Code 11378-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 367.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358365
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	134.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4207 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PLACE
 City MASPETH State NY Zip Code 11378-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358367
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PLACE
 City MASPETH State NY Zip Code 11378-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370803
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SAENZ, GLORIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 25 69TH PLACE
 City MASPETH State NY Zip Code 11378-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374730
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4208 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1434 PEVANS PKWY
 City RAPID CITY State SD Zip Code 57701-5326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAPID CITY MEDICAL CENTER Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413680
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

B. SAGER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9106 FORTUNA DRIVE 4303
 City MERCER ISLAND State WA Zip Code 98040-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.351063
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. SAGER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9106 FORTUNA DRIVE 4303
 City MERCER ISLAND State WA Zip Code 98040-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379858
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4209 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAGNESS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3111 SPRUCE LANE
 City MINNETONKA State MN Zip Code 55305-3617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA AIR LINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422197
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SAGUI, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 ROMONA ROAD
 City WILMETTE State IL Zip Code 60091-1222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPLAR SECURITIES LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.371558
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. SAGUI, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 WASHINGTON AVENUE
 City SPRING LAKE State NJ Zip Code 07762-1425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPLAR TRADING CO Occupation (for Individual) TRADER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.371559
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4210 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAHAKIAN, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 649
 City STATE COLLEGE State PA Zip Code 16804-0649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.377856
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SAHIN, LYNN, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10010 PARK TRAIL
 City HOUSTON State TX Zip Code 77024-5643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.343873
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. SAHIN, LYNN, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10010 PARK TRAIL
 City HOUSTON State TX Zip Code 77024-5643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392820
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4211 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAJI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **2642 GREENFIELD AVENUE**
 City **LOS ANGELES** State **CA** Zip Code **90064-3128**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.396233
 Amount of Each Receipt this Period **500.00**
 Memo Item
CONTRIBUTION

B. SALE, OLIVER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **604 GOLDEN BEAR PASS**
 City **DAHLONEGA** State **GA** Zip Code **30533-7177**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.408043
 Amount of Each Receipt this Period **1000.00**
 Memo Item
CONTRIBUTION

C. SALES, WILLIAM, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **17 5TH STREET SE**
 City **WASHINGTON** State **DC** Zip Code **20003-1119**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355410
 Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1600.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4212 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALES, WILLIAM, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 5TH STREET SE

City WASHINGTON	State DC	Zip Code 20003-1119
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359275

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SALES, WILLIAM, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 5TH STREET SE

City WASHINGTON	State DC	Zip Code 20003-1119
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385706

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SALES, WILLIAM, , , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 5TH STREET SE

City WASHINGTON	State DC	Zip Code 20003-1119
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398838

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4213 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348520
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348593
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349908
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4214 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.357726
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358400
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363770
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4215 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392017
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418058
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418060
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4216 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 581890
 City KISSIMMEE State FL Zip Code 34758-0024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422826
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SALO, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 MARLBOROUGH STREET, APT 2
 City BOSTON State MA Zip Code 02116-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346183
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SALO, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 291 MARLBOROUGH STREET, APT 2
 City BOSTON State MA Zip Code 02116-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365242
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4217 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 586
257

City BORREGO SPRINGS State CA Zip Code 92004-0586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.382331

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 586
257

City BORREGO SPRINGS State CA Zip Code 92004-0586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.382333

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 586
257

City BORREGO SPRINGS State CA Zip Code 92004-0586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403288

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4218 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 586
257

City BORREGO SPRINGS State CA Zip Code 92004-0586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 29 / 2016
Transaction ID : SA11A.416082

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SALT, HADDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 586
257

City BORREGO SPRINGS State CA Zip Code 92004-0586

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.419091

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SALTER, EARL, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 E LAS PALMAS

City FULLERTON State CA Zip Code 92835-1612

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
07 / 15 / 2016
Transaction ID : SA11A.346484

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4219 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SALVA, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 460 W CHESTNUT HILL AVE
 City PHILADELPHIA State PA Zip Code 19118-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST CORPORATION Occupation (for Individual) FINANCIAL EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403007
 Amount of Each Receipt this Period 3500.00
 Memo Item CONTRIBUTION

B. SALVITTI, E. RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 E BEAU STREET
 City WASHINGTON State PA Zip Code 15301-6661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHWESTERN PA EYE CLINIC Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361438
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SAMBELL, ANDREW, , DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N GRAND
 City WAXAHACHIE State TX Zip Code 75165-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMD Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 07 / 24 / 2016
Transaction ID : SA11A.354593
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4220 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMBELL, ANDREW, , DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N GRAND
 City WAXAHACHIE State TX Zip Code 75165-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMD Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 07 / 24 / 2016
Transaction ID : SA11A.354594
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. SAMBELL, ANDREW, , DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N GRAND
 City WAXAHACHIE State TX Zip Code 75165-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMD Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379075
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. SAMBELL, ANDREW, , DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 N GRAND
 City WAXAHACHIE State TX Zip Code 75165-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMD Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409021
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4221 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMMAK, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 511 GOLDFINCH LANE
 City AMBLER State PA Zip Code 19002-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATA COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412961
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SAMMAK, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 511 GOLDFINCH LANE
 City AMBLER State PA Zip Code 19002-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATA COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418834
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SAMPLE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 668 OCEAN PALM WAY
 City ST. AUGUSTINE State FL Zip Code 32080-8708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351972
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4222 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMPLE, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 668 OCEAN PALM WAY
City ST. AUGUSTINE State FL Zip Code 32080-8708
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416036
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SAMPSON, CAROLYN, W., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 140 REACH RUN
City ITHACA State NY Zip Code 14850-8518
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402306
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SAMSON, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9200 W SUNSET 7TH FLOOR
City WEST HOLLYWOOD State CA Zip Code 90069-3601
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SNF MANAGEMENT Occupation (for Individual) CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 11610.45

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.354986
Amount of Each Receipt this Period 11610.45
 Memo Item CONTRIBUTION
IN-KIND: JFC EVENT CATERING AND RENTALS

SUBTOTAL of Receipts This Page (optional).....▶ 11960.45
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4223 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAMUELSON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5408 CAPELLA CT
 City ATLANTIC BEACH State FL Zip Code 32233-4582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398577
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SAMUELSON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5408 CAPELLA CT
 City ATLANTIC BEACH State FL Zip Code 32233-4582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420393
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SANCHEZ, DARLENE, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E 9585 S
 City SANDY State UT Zip Code 84070-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357909
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4224 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANCHEZ, DARLENE, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E 9585 S
 City SANDY State UT Zip Code 84070-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.363233
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SANCHEZ, DARLENE, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 E 9585 S
 City SANDY State UT Zip Code 84070-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389005
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. SANCHEZ, JANIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MCKELVEY AVENUE
 City STOCKTON State CA Zip Code 95210-1934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379537
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4225 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANCHEZ, TRACIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 885 YORKSHIRE DRIVE
 City LIMA State OH Zip Code 45804-3376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIMA PALLET CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406156
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347365
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366756
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4226 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396807
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404748
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SAND, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3370 NANEUM RD
 City ELLENSBURG State WA Zip Code 98926-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBGYN OF ELLENSBURG Occupation (for Individual) BUSINESS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404749
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4227 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDBULTE, ARLON, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 KENDALL DR
 City MARCO ISLAND State FL Zip Code 34145-2481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352604
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SANDBULTE, ARLON, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 KENDALL DR
 City MARCO ISLAND State FL Zip Code 34145-2481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363868
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SANDBULTE, ARLON, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 KENDALL DR
 City MARCO ISLAND State FL Zip Code 34145-2481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381995
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4228 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDBULTE, ARLON, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 KENDALL DR
 City MARCO ISLAND State FL Zip Code 34145-2481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397577
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SANDBERG, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 531 E 3270 N
 City LEHI State UT Zip Code 84043-3184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376476
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SANDBERG, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 531 E 3270 N
 City LEHI State UT Zip Code 84043-3184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396594
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4229 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, KIRK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4543 RHONDA RD.

City ANDERSON	State CA	Zip Code 96007-9002
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406085

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SANDERS, KIRK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4543 RHONDA RD.

City ANDERSON	State CA	Zip Code 96007-9002
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406088

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SANDERS, KIRK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4543 RHONDA RD.

City ANDERSON	State CA	Zip Code 96007-9002
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406127

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4230 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, KIRK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4543 RHONDA RD.

City ANDERSON	State CA	Zip Code 96007-9002
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406128

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SANDERSON, RUBLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 415 CHURCH STREET APT 3015
APT. 3015

City NASHVILLE	State TN	Zip Code 37219-1849
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) BUSINESS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.396541

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. SANDERS, TARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 TWELVE OAKS TRAIL

City ORMOND BEACH	State FL	Zip Code 32174-4954
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPASS FINANCIAL	Occupation (for Individual) FINANCIAL PLANNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.354061

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4231 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDFORD, T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 ROSARITA DRIVE
 City FULLERTON State CA Zip Code 92835-1841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389743
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. SANDIFER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21824 ONAWA PL
 City DIAMOND BAR State CA Zip Code 91765-2815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413824
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SANDIFER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21824 ONAWA PL
 City DIAMOND BAR State CA Zip Code 91765-2815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413825
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4232 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDIFER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21824 ONAWA PL
 City DIAMOND BAR State CA Zip Code 91765-2815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422316
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SANDIFER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21824 ONAWA PL
 City DIAMOND BAR State CA Zip Code 91765-2815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECHNIP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422317
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SANDOZ, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 WHITE PLAINS ROAD
 City TARRYTOWN State NY Zip Code 10591-5102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOMURA Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411165
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4233 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDVIK, TERENCE, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3400 SELKIRK DR

City BURNSVILLE State MN Zip Code 55337-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383227

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. SANDVIK, TERENCE, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3400 SELKIRK DR

City BURNSVILLE State MN Zip Code 55337-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403107

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. SANDVIK, TERENCE, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3400 SELKIRK DR

City BURNSVILLE State MN Zip Code 55337-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415487

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4234 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANFELIPPO, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1817 RAVENEAUX LANE
 City TYLER State TX Zip Code 75703-5877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356525
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. SANFELIPPO, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1817 RAVENEAUX LANE
 City TYLER State TX Zip Code 75703-5877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364286
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. SANGUI, GARY, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 W LAKE COOK RD STE 115
 City BUFFALO GROVE State IL Zip Code 60089-2093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379118
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4235 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3608 SW ELM MANOR AVE
 City BENTONVILLE State AR Zip Code 72712-5772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) CORPORATE AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389332
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SANSOM, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9455 PENSACOLA BOULEVARD SUITE B
 City PENSACOLA State FL Zip Code 32534-1237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN M. SANSOM, P.A. Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 497.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401214
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SANTANA, DORIS, COPLEN, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2149 WAVERLEY STREET
 City PALO ALTO State CA Zip Code 94301-3955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357895
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4236 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANTANA, DORIS, COPLEN, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2149 WAVERLEY STREET
City PALO ALTO State CA Zip Code 94301-3955
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366324
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SAPER, EUGENE, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 21966 DOLORES STREET APT 337
City CASTRO VALLEY State CA Zip Code 94546-6966
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414502
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SAPIRO, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 439 MONTGOMERY ST.
City SALINAS State CA Zip Code 93907-2041
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 565.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.349741
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4237 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355582
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384471
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384514
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4238 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 09 / 16 / 2016
Transaction ID : SA11A.398630
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 09 / 16 / 2016
Transaction ID : SA11A.398631
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SAPIRO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MONTGOMERY ST.
 City SALINAS State CA Zip Code 93907-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412219
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4239 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAPP, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 160

City HIAWATHA State IA Zip Code 52233-0160

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TIMBERLINE MANAGEMENT INC. Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368156

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. SARGENT, FRAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 DAVIS DRIVE

City SAGINAW State MI Zip Code 48602-1947

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365926

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

C. SARGENT, MARY, T., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 LOEFFLER ROAD APARTMENT T413

City BLOOMFIELD State CT Zip Code 06002-4302

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414618

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4240 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SATCHER, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1445 CHASTAIN PARKWAY W.

City PACIFIC PALISADES	State CA	Zip Code 90272-1945
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350432

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SATCHER, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1445 CHASTAIN PARKWAY W.

City PACIFIC PALISADES	State CA	Zip Code 90272-1945
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380899

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SATCHER, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1445 CHASTAIN PARKWAY W.

City PACIFIC PALISADES	State CA	Zip Code 90272-1945
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406231

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4241 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUER, ANN ELISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6060 RIVER DRIVE
 City MASON NECK State VA Zip Code 22079-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN CORP Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.353909
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SAUERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 W. PONCE DE LEON AVE. 31
 City DECATUR State GA Zip Code 30030-3217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SAUERS GROUP, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368517
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SAUERS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 W. PONCE DE LEON AVE. 31
 City DECATUR State GA Zip Code 30030-3217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SAUERS GROUP, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368534
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4242 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUERS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 W. PONCE DE LEON AVE.
31

City DECATUR State GA Zip Code 30030-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SAUERS GROUP, INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt **08 / 16 / 2016**

Transaction ID : SA11A.368538

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. SAUERS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 W. PONCE DE LEON AVE.
31

City DECATUR State GA Zip Code 30030-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SAUERS GROUP, INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt **09 / 06 / 2016**

Transaction ID : SA11A.390087

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. SAUERS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 W. PONCE DE LEON AVE.
31

City DECATUR State GA Zip Code 30030-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SAUERS GROUP, INC Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt **09 / 15 / 2016**

Transaction ID : SA11A.398269

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4243 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYMCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348584
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYMCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.356476
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYMCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.356480
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4244 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYMCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398943
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYMCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403302
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SAUNDERS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 CORONADO LANE
 City LYMCHBURG State VA Zip Code 24502-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403334
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4245 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SAUNDERS, NANCY, , ,

Mailing Address 1032 CORONADO LANE

City LYMCHBURG State VA Zip Code 24502-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016

Transaction ID : SA11A.410714

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SAUNDERS, NANCY, , ,

Mailing Address 1032 CORONADO LANE

City LYMCHBURG State VA Zip Code 24502-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11A.415536

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SAWIN, KRISTEN, , ,

Mailing Address 1713 S SUNSET DR.

City TACOMA State WA Zip Code 98465-1238

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEYERHAEUSER Occupation (for Individual) VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : SA11A.362027

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2075.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4246 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SAWYER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37578 DALE DRIVE
 City NEW BOSTON State MI Zip Code 48164-9047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOCIETY OF MANUFACTURING ENGINEERS Occupation (for Individual) JOURNALIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.350838
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SAWYER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37578 DALE DRIVE
 City NEW BOSTON State MI Zip Code 48164-9047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOCIETY OF MANUFACTURING ENGINEERS Occupation (for Individual) JOURNALIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374718
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SAWYER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37578 DALE DRIVE
 City NEW BOSTON State MI Zip Code 48164-9047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOCIETY OF MANUFACTURING ENGINEERS Occupation (for Individual) JOURNALIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399631
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4247 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCALES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 HUNTING COUNTRY ROAD
City TRYON State NC Zip Code 28782-9675
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SYNTHETEX, LLC Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416064
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCALES, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 23 HUNTING COUNTRY ROAD
City TRYON State NC Zip Code 28782-9675
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SYNTHETEX, LLC Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416065
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCARLETT, R., RICHARD, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 12139
City JACKSON State WY Zip Code 83002-2139
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391348
Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4248 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCARLETT III, WILLIAM, , ,

Mailing Address **3150 WEST WILDERNESS LANE**

City **WILSON** State **WY** Zip Code **83002-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **INVESTMENTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 31 / 2016

Transaction ID : SA11A.360222

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHACHTE, JR, WILLIAM, , ,

Mailing Address **172 BROAD ST**

City **CHARLESTON** State **SC** Zip Code **29401-2453**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
08 / 16 / 2016

Transaction ID : SA11A.368755

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHACHTE, JR, WILLIAM, , ,

Mailing Address **172 BROAD ST**

City **CHARLESTON** State **SC** Zip Code **29401-2453**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.382290

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **1075.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4249 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHACHTE, JR, WILLIAM, , ,

Mailing Address 172 BROAD ST

City CHARLESTON	State SC	Zip Code 29401-2453
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11A.382297

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHACHTE, JR, WILLIAM, , ,

Mailing Address 172 BROAD ST

City CHARLESTON	State SC	Zip Code 29401-2453
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11A.386965

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHACHTE, JR, WILLIAM, , ,

Mailing Address 172 BROAD ST

City CHARLESTON	State SC	Zip Code 29401-2453
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.403507

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4250 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SCHACHTE, JR, WILLIAM, , ,		Date of Receipt
Mailing Address 172 BROAD ST		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City CHARLESTON	State SC	Zip Code 29401-2453
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.403514
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="375.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SCHACHTE, JR, WILLIAM, , ,		Date of Receipt
Mailing Address 172 BROAD ST		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City CHARLESTON	State SC	Zip Code 29401-2453
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.403584
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="375.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCHACHTE, JR, WILLIAM, , ,		Date of Receipt
Mailing Address 172 BROAD ST		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City CHARLESTON	State SC	Zip Code 29401-2453
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.418061
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="375.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4251 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHACHTE, JR, WILLIAM, , ,
 Mailing Address 172 BROAD ST
 City CHARLESTON State SC Zip Code 29401-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418062
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHACHTE, JR, WILLIAM, , ,
 Mailing Address 172 BROAD ST
 City CHARLESTON State SC Zip Code 29401-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420155
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHACHTE, JR, WILLIAM, , ,
 Mailing Address 172 BROAD ST
 City CHARLESTON State SC Zip Code 29401-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420162
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4252 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHACHTE, JR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 172 BROAD ST
 City CHARLESTON State SC Zip Code 29401-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420164
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHAEFER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 TREMONT STREET
 City HARTFORD State CT Zip Code 06105-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SATES OF COMM. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377921
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SCHAEFER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16621 X ST
 City OMAHA State NE Zip Code 68135-2373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.356489
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4253 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16621 X ST
 City OMAHA State NE Zip Code 68135-2373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370496
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHAEFER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16621 X ST
 City OMAHA State NE Zip Code 68135-2373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404444
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHAEFER, FRITZ, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 691 DEER PARK ROD
 City DIX HILLS State NY Zip Code 11746-6201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTIC NURSERIES Occupation (for Individual) GARDENER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400453
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4254 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFER, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364815
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHAEFER, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370237
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHAEFER, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380299
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4255 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCHAEFER, IRENE, , ,

Mailing Address **272 FAIRMOUNT AVE**

City **CHATHAM** State **NJ** Zip Code **07928-1825**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.380301

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCHAEFER, IRENE, , ,

Mailing Address **272 FAIRMOUNT AVE**

City **CHATHAM** State **NJ** Zip Code **07928-1825**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt
09 / 22 / 2016

Transaction ID : SA11A.403883

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCHAEFER, IRENE, , ,

Mailing Address **272 FAIRMOUNT AVE**

City **CHATHAM** State **NJ** Zip Code **07928-1825**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.422117

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4256 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFER, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422129
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHAEENEN, N., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 MIDWOOD TERRACE
 City MADISON State NJ Zip Code 07940-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383349
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SCHAEENEN, NELSON, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 MIDWOOD TER
 City MADISON State NJ Zip Code 07940-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364208
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4257 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFER, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380294
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. SCHAEFER, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.380296
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. SCHAEFER, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 272 FAIRMOUNT AVE
 City CHATHAM State NJ Zip Code 07928-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.399001
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4258 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAEFFER, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8417 ENGLISH BAY PKWY
 City AMARILLO State TX Zip Code 79119-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 23 / 2016**
Transaction ID : SA11A.354635
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHAEFFER, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8417 ENGLISH BAY PKWY
 City AMARILLO State TX Zip Code 79119-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.384920
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SCHAFFNIT, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1385
 City ROCKINGHAM State NC Zip Code 28380-1385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355471
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4259 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCHAFFNIT, BOBBIE, , ,

Mailing Address **P. O. BOX 1385**

City ROCKINGHAM	State NC	Zip Code 28380-1385
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
08 / 17 / 2016

Transaction ID : SA11A.370475

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCHAFFNIT, BOBBIE, , ,

Mailing Address **P. O. BOX 1385**

City ROCKINGHAM	State NC	Zip Code 28380-1385
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
09 / 06 / 2016

Transaction ID : SA11A.390214

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCHAFFNIT, BOBBIE, , ,

Mailing Address **P. O. BOX 1385**

City ROCKINGHAM	State NC	Zip Code 28380-1385
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
09 / 13 / 2016

Transaction ID : SA11A.396743

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4260 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAFFNIT, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1385
 City ROCKINGHAM State NC Zip Code 28380-1385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.398064
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHAFFNIT, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1385
 City ROCKINGHAM State NC Zip Code 28380-1385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.398065
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHAFFNIT, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1385
 City ROCKINGHAM State NC Zip Code 28380-1385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410468
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4261 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAFFNIT, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1385
 City ROCKINGHAM State NC Zip Code 28380-1385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410470
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCHAFFNIT, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1385
 City ROCKINGHAM State NC Zip Code 28380-1385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422294
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCHAFFNIT, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 1385
 City ROCKINGHAM State NC Zip Code 28380-1385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422296
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4262 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHAFFER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15710 MONTEBELLO RD
 City CUPERTINO State CA Zip Code 95014-5409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHOTOGRAPHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.393983
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHAFFER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15710 MONTEBELLO RD
 City CUPERTINO State CA Zip Code 95014-5409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHOTOGRAPHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409932
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHAIBLE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 SAN YSIDRO LN
 City SANTA BARBARA State CA Zip Code 93108-1325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERCORE PARTNERS Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390358
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4263 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHALLENMULLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3377 MILL VISTA RD.
 APT 3112
 City HIGHLANDS RANCH State CO Zip Code 80129-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355396
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHALLENMULLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3377 MILL VISTA RD.
 APT 3112
 City HIGHLANDS RANCH State CO Zip Code 80129-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359607
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHALLENMULLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3377 MILL VISTA RD.
 APT 3112
 City HIGHLANDS RANCH State CO Zip Code 80129-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359608
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4264 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHALLENMULLER, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3377 MILL VISTA RD.
APT 3112

City HIGHLANDS RANCH State CO Zip Code 80129-2444

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366948

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. SCHALLENMULLER, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3377 MILL VISTA RD.
APT 3112

City HIGHLANDS RANCH State CO Zip Code 80129-2444

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380753

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. SCHALLENMULLER, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3377 MILL VISTA RD.
APT 3112

City HIGHLANDS RANCH State CO Zip Code 80129-2444

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394562

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4265 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHANZMEYER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 FREEDOM BLVD
 APT. 123
 City JEFFERSON CITY State MO Zip Code 65109-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348978
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHANZMEYER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 FREEDOM BLVD
 APT. 123
 City JEFFERSON CITY State MO Zip Code 65109-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372757
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHANZMEYER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 FREEDOM BLVD
 APT. 123
 City JEFFERSON CITY State MO Zip Code 65109-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.396698
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4266 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHANZMEYER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 FREEDOM BLVD
 APT. 123
 City JEFFERSON CITY State MO Zip Code 65109-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396699
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHANZMEYER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 FREEDOM BLVD
 APT. 123
 City JEFFERSON CITY State MO Zip Code 65109-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398098
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHANZMEYER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 FREEDOM BLVD
 APT. 123
 City JEFFERSON CITY State MO Zip Code 65109-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398114
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4267 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHANZMEYER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 FREEDOM BLVD
 APT. 123
 City JEFFERSON CITY State MO Zip Code 65109-0087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398115
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHANEL, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 CITRUS GROVE BLVD
 City WEST PALM BEACH State FL Zip Code 33412-2375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHANEL & ASSOCIATES Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356258
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHANEL, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 CITRUS GROVE BLVD
 City WEST PALM BEACH State FL Zip Code 33412-2375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHANEL & ASSOCIATES Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378617
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4268 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHANEL, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 CITRUS GROVE BLVD
 City WEST PALM BEACH State FL Zip Code 33412-2375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHANEL & ASSOCIATES Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381873
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. SCHANEL, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 CITRUS GROVE BLVD
 City WEST PALM BEACH State FL Zip Code 33412-2375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHANEL & ASSOCIATES Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383010
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. SCHANEL, GLENN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12632 CITRUS GROVE BLVD
 City WEST PALM BEACH State FL Zip Code 33412-2375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHANEL & ASSOCIATES Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402268
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4269 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHANEL, GLENN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12632 CITRUS GROVE BLVD

City WEST PALM BEACH	State FL	Zip Code 33412-2375
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHANEL & ASSOCIATES	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.411286

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SCHARBAUER, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2411 STUTZ PLACE

City MDLAND	State TX	Zip Code 79705-4931
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2016

Transaction ID : SA11A.375121

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. SCHAUS, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 SABLE OAK DR.

City VERO BEACH	State FL	Zip Code 32963-3821
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2016

Transaction ID : SA11A.359561

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4270 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHECHTER, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11STODDART CT
 City LOCUST VALLEY State NY Zip Code 11560-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382182
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347805
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366639
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4271 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370253
 Amount of Each Receipt this Period
 18.00
 Memo Item
 CONTRIBUTION

B. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2016
Transaction ID : SA11A.389129
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SCHEIDT, EDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3667 W. ST. RD. 44
 City SHELBYVILLE State IN Zip Code 46176-8837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402865
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	168.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4272 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHELL, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 FIFTH AVENUE
 8D
 City NEW YORK State NY Zip Code 10028-0110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKADDEN ARPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357672
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. SCHELL, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 FIFTH AVENUE
 8D
 City NEW YORK State NY Zip Code 10028-0110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKADDEN ARPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394446
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SCHELL, JAMES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 FIFTH AVENUE
 8D
 City NEW YORK State NY Zip Code 10028-0110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKADDEN ARPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411199
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4273 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 S[MMONS LANE
 City NOVATO State CA Zip Code 94945-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.372974
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHELLER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 S[MMONS LANE
 City NOVATO State CA Zip Code 94945-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400222
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHELLHAS, ROBERT, J., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2639 N ROOSEVELT ST
 City ARLINGTON State VA Zip Code 22207-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERNST & YOUNG LLP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389408
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4274 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHERER, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5940 TAFT AVENUE
 City: PIEDMONT State: CA Zip Code: 94618-1741
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): DELOITTE CONSULTING Occupation (for Individual): CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 300.00

Date of Receipt: 08 / 11 / 2016
 Transaction ID : SA11A.364406
 Amount of Each Receipt this Period: 200.00
 Memo Item CONTRIBUTION

B. SCHERER, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5940 TAFT AVENUE
 City: PIEDMONT State: CA Zip Code: 94618-1741
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): DELOITTE CONSULTING Occupation (for Individual): CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 300.00

Date of Receipt: 08 / 29 / 2016
 Transaction ID : SA11A.381082
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

C. SCHEUPLEIN, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 548 DIVINE CIRCLE
 City: ORLANDO State: FL Zip Code: 32828-8143
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): NONE Occupation (for Individual): RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 30 / 2016
 Transaction ID : SA11A.418392
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4275 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEUER, JAMES, C., COL., USAF RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : SA11A.347432

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SCHEUER, JAMES, C., COL., USAF RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11A.386129

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHEUER, JAMES, C., COL., USAF RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016

Transaction ID : SA11A.391751

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4276 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEUER, JAMES, C., COL., USAF RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016

Transaction ID : SA11A.396897

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHEUER, JAMES, C., COL., USAF RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11A.407664

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHEUER, JAMES, C., COL., USAF RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
486.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11A.411418

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4277 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
486.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2016

Transaction ID : SA11A.413914

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHEURER, JOHN, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 470 HOLT AVE

City WINTER PARK State FL Zip Code 32789-5075

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.365824

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SCHEURER, JOHN, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 470 HOLT AVE

City WINTER PARK State FL Zip Code 32789-5075

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386875

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4278 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEURER, JOHN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 HOLT AVE
 City WINTER PARK State FL Zip Code 32789-5075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405893
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHIAVONE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 FRANKLIN ST
 City BUFFALO State NY Zip Code 14202-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMSDEN MCCORMICK LLP Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379406
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SCHIADA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8352 VEREDA DEL PADRE
 City GOLETA State CA Zip Code 93117-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.354971
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 635.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4279 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHIADA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8352 VEREDA DEL PADRE
 City GOLETA State CA Zip Code 93117-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.363567
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SCHIAVONI, VICTORIA, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 FERRY ROAD
 City SAG HARBOR State NY Zip Code 11963-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 212.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359826
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHIAVONI, VICTORIA, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 FERRY ROAD
 City SAG HARBOR State NY Zip Code 11963-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 212.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.382895
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4280 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHIAVONI, VICTORIA, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 FERRY ROAD
 City SAG HARBOR State NY Zip Code 11963-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391720
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SCHIAVONI, VICTORIA, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 FERRY ROAD
 City SAG HARBOR State NY Zip Code 11963-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416924
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHIAVONI, VICTORIA, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 FERRY ROAD
 City SAG HARBOR State NY Zip Code 11963-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418430
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4281 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHIAVONI, VICTORIA, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 391 FERRY ROAD
 City SAG HARBOR State NY Zip Code 11963-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418456
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHIELD, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ROCKBROOK LANE
 City COLORADO SPRINGS State CO Zip Code 80904-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352099
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHIELD, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ROCKBROOK LANE
 City COLORADO SPRINGS State CO Zip Code 80904-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375834
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4282 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHIELD, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ROCKBROOK LANE
 City COLORADO SPRINGS State CO Zip Code 80904-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388783
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SCHIELD, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ROCKBROOK LANE
 City COLORADO SPRINGS State CO Zip Code 80904-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401457
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SCHIELD, WENDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 ROCKBROOK LANE
 City COLORADO SPRINGS State CO Zip Code 80904-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409924
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4283 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHILLING, PAUL, J., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 431 PORPOISE POINT DRIVE

City SAINT AUGUSTINE	State FL	Zip Code 32084-2959
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358568

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. SCHILLING, PAUL, J., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 431 PORPOISE POINT DRIVE

City SAINT AUGUSTINE	State FL	Zip Code 32084-2959
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408877

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SCHILDKNECHT, RAINER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 WOODLAWN AVE

City WINNETKA	State IL	Zip Code 60093-1552
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAINER SCHILDKNECHT	Occupation (for Individual) ARCHITECT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359841

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4284 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINER SCHILDKNECHT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384752
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. SCHILDKNECHT, RAINER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WOODLAWN AVE
 City WINNETKA State IL Zip Code 60093-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINER SCHILDKNECHT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419551
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SCHILLI, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 351
 City REMINGTON State IN Zip Code 47977-0351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHILLI TRANSPORTATION SERVICES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348814
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4285 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLIFKE, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19512 PLANTERS POINT DRIVE
 City BOCA RATON State FL Zip Code 33434-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARONBERG GOLDGEHN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 382.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355424
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. SCHLIFKE, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19512 PLANTERS POINT DRIVE
 City BOCA RATON State FL Zip Code 33434-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARONBERG GOLDGEHN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 382.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.411965
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SCHLIFKE, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19512 PLANTERS POINT DRIVE
 City BOCA RATON State FL Zip Code 33434-5146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARONBERG GOLDGEHN Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 382.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.422332
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4286 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLIFSKE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 GREENWAY TERRACE
 City ELM GROVE State WI Zip Code 53122-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391343
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SCHLIFSKE, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 GREENWAY TERRACE
 City ELM GROVE State WI Zip Code 53122-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391338
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. SCHLOTT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 PLEASANT VALLEY ROAD
 City MENDHAM State NJ Zip Code 07945-2918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.374039
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4287 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHLOTT, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 PLEASANT VALLEY ROAD

City MENDHAM	State NJ	Zip Code 07945-2918
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.390798

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. SCHLUMBERGER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 175 BRYCE LANE

City FALLBROOK	State CA	Zip Code 92028-2459
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL TEST EQUIPMENT	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352381

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SCHLUMBERGER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 175 BRYCE LANE

City FALLBROOK	State CA	Zip Code 92028-2459
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL TEST EQUIPMENT	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375955

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4288 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHLUMBERGER, SCOTT, , ,

Mailing Address **175 BRYCE LANE**

City FALLBROOK	State CA	Zip Code 92028-2459
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL TEST EQUIPMENT	Occupation (for Individual) VP
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.401384

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHMIEDER, BILL, , ,

Mailing Address **2268 BROWNCROFT BLVD**

City ROCHESTER	State NY	Zip Code 14625-1000
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAKER COMMODITIES	Occupation (for Individual) DIVISION GM
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
08 / 23 / 2016

Transaction ID : SA11A.376420

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHMIDT, CARL, A., MR., JR.

Mailing Address **56 WAVE ST.**

City BEACHWOOD	State NJ	Zip Code 08722-3839
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt
07 / 18 / 2016

Transaction ID : SA11A.349814

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4289 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349818
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358036
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370043
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4290 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377610
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380804
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SCHMIDT, CARL, A., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST.
 City BEACHWOOD State NJ Zip Code 08722-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382465
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4291 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, CARL, A., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WAVE ST.

City BEACHWOOD	State NJ	Zip Code 08722-3839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390353

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SCHMIDT, CARL, A., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WAVE ST.

City BEACHWOOD	State NJ	Zip Code 08722-3839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : SA11A.400262

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SCHMIDT, CARL, A., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 WAVE ST.

City BEACHWOOD	State NJ	Zip Code 08722-3839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404746

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4292 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIEDER, GEORGE, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4327 ORTEGA FARMS CIRCLE
 City JACKSONVILLE State FL Zip Code 32210-7424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370925
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SCHMIDT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4506 PROVIDENCE POINT PLACE SE
 City ISSAQUAH State WA Zip Code 98029-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354638
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHMIDT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4506 PROVIDENCE POINT PLACE SE
 City ISSAQUAH State WA Zip Code 98029-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357174
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4293 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4506 PROVIDENCE POINT PLACE SE
 City ISSAQUAH State WA Zip Code 98029-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381878
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHMIDT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4506 PROVIDENCE POINT PLACE SE
 City ISSAQUAH State WA Zip Code 98029-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391666
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SCHMIDT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4506 PROVIDENCE POINT PLACE SE
 City ISSAQUAH State WA Zip Code 98029-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408238
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4294 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4506 PROVIDENCE POINT PLACE SE
 City ISSAQUAH State WA Zip Code 98029-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416781
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SCHMIDT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4506 PROVIDENCE POINT PLACE SE
 City ISSAQUAH State WA Zip Code 98029-6835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418150
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHMIDT, JUDEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 736 EMDEN STREET
 City HENDERSON State NV Zip Code 89015-4661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361328
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4295 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMITT, MAUREEN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 ST. RITAS LANE
 City WILLIAMSVILLE State NY Zip Code 14221-2055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHMITT SALES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391530
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SCHMIDT, MICHAEL, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 585 SCHOONER LANE
 City LONGBOAT KEY State FL Zip Code 34228-3727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384618
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHMIDT, MICHAEL, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 585 SCHOONER LANE
 City LONGBOAT KEY State FL Zip Code 34228-3727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384640
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4296 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMITZ, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9800 ALYDAR COURT

City NOKESVILLE	State VA	Zip Code 20181-3387
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC	Occupation (for Individual) COMMODITIES TRADER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359843

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. SCHMITZ, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9800 ALYDAR COURT

City NOKESVILLE	State VA	Zip Code 20181-3387
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC	Occupation (for Individual) COMMODITIES TRADER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384757

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. SCHMITZ, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9800 ALYDAR COURT

City NOKESVILLE	State VA	Zip Code 20181-3387
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC	Occupation (for Individual) COMMODITIES TRADER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
336.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419562

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	177.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4297 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC Occupation (for Individual) COMMODITIES TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421900
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. SCHMITZ, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 ALYDAR COURT
 City NOKESVILLE State VA Zip Code 20181-3387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIRGINIA CONTRACTORS SUPPLY, INC Occupation (for Individual) COMMODITIES TRADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421909
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. SCHMIDT, SANDEFUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 E NORMANDY DR
 City PROVO State UT Zip Code 84604-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352173
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4298 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, SANDEFUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 E NORMANDY DR
 City PROVO State UT Zip Code 84604-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383876
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHMIDT, SANDEFUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 E NORMANDY DR
 City PROVO State UT Zip Code 84604-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.398551
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCHMIDT, SANDEFUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 E NORMANDY DR
 City PROVO State UT Zip Code 84604-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405600
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4299 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT, SANDEFUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 E NORMANDY DR
 City PROVO State UT Zip Code 84604-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422963
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHMOYER, RANDALL, L., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33641 STETSON LN
 City LEESBURG State FL Zip Code 34788-3735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.393804
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SCHMOYER, RANDALL, L., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33641 STETSON LN
 City LEESBURG State FL Zip Code 34788-3735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414183
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4300 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMOYER, RANDALL, L., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33641 STETSON LN
 City LEESBURG State FL Zip Code 34788-3735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422372
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHMOYER, RANDALL, L., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33641 STETSON LN
 City LEESBURG State FL Zip Code 34788-3735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422383
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHNEIDER, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1223 BALDRIDGE DRIVE
 City SEVERANCE State CO Zip Code 80615-8630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353619
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4301 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNEIDER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1223 BALDRIDGE DRIVE

City SEVERANCE	State CO	Zip Code 80615-8630
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.382258

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHNEIDER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1223 BALDRIDGE DRIVE

City SEVERANCE	State CO	Zip Code 80615-8630
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.382259

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHNEIDER, BEVERLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1223 BALDRIDGE DRIVE

City SEVERANCE	State CO	Zip Code 80615-8630
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt
09 / 09 / 2016
Transaction ID : SA11A.392060

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4302 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNEEBECK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 741 NORTH MANASOTA KEY ROAD
 City ENGLEWOOD State FL Zip Code 34223-9758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.343868
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. SCHNEIDER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1092
 City FARGO State ND Zip Code 58107-1092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL GOVERNMENTNT Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.376293
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHNEIDER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4124 PINE POINT ROAD
 City SARTELL State MN Zip Code 56377-9751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OTTOBOCK HEALTHCARE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.377500
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4303 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNEIDER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1092

City FARGO	State ND	Zip Code 58107-1092
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEDERAL GOVERNMENTNT	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406350

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SCHNEIDER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1092

City FARGO	State ND	Zip Code 58107-1092
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEDERAL GOVERNMENTNT	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420107

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SCHNEIDER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1092

City FARGO	State ND	Zip Code 58107-1092
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FEDERAL GOVERNMENTNT	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420109

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4304 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNUCK, CRAIG, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 CARRSWOLD DRIVE
 City SAINT LOUIS State MO Zip Code 63105-2913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.347209
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. SCHOOLER, ERIC, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22355 SW CHILKAT TERR
 City TUALATIN State OR Zip Code 97062-9075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLINS PINE CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.367892
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. SCHRAM, GUS, W., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 W SALLIER STREET
 City LAKE CHARLES State LA Zip Code 70601-5631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JACK LAWTON LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.380938
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4305 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHRANK, JOEL, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4231 POINT LA VISTA RD W
 City JACKSONVILLE State FL Zip Code 32207-6247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEART SPECIALISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356319
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHRANK, JOEL, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4231 POINT LA VISTA RD W
 City JACKSONVILLE State FL Zip Code 32207-6247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEART SPECIALISTS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414415
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SCHRAUDENBACH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2545 SUGARLOAF CLUB DR
 City DULUTH State GA Zip Code 30097-7406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EY Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416347
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4306 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHRADER, MARTHA, K., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2838 ENCORE LANE

City WEST LAFAYETTE	State IN	Zip Code 47906-1416
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) HOUSEWIFE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11A.392896

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. SCHRIMSHER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1541 HEMPEL AVE.

City WINDERMERE	State FL	Zip Code 34786-8117
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359329

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SCHRIMSHER, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1541 HEMPEL AVE.

City WINDERMERE	State FL	Zip Code 34786-8117
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384577

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4307 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHRIMSHER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1541 HEMPEL AVE.
 City WINDERMERE State FL Zip Code 34786-8117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415044
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SCHROEDER, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1947 KETTLE CREEK DR.
 City DE PERE State WI Zip Code 54115-9280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JACK SCHROEDER AND ASSOCIATES, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353594
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SCHUBERT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 DUTTS MILL EAST
 City WEST CHESTER State PA Zip Code 19382-7600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSTI Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383285
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4308 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHUBERT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 DUTTS MILL EAST
 City WEST CHESTER State PA Zip Code 19382-7600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSTI Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420063
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHUBERT, WALTER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3415
 City SEQUIM State WA Zip Code 98382-5027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTION PROPERTY MANAGEMENT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 493.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344451
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. SCHUBERT, WALTER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3415
 City SEQUIM State WA Zip Code 98382-5027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTION PROPERTY MANAGEMENT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 493.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344452
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	362.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4309 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SCHUBERT, WALTER, , MR.,			Date of Receipt
Mailing Address PO BOX 3415			<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2016"/>
City SEQUIM	State WA	Zip Code 98382-5027	Transaction ID : SA11A.359037
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="131.00"/>
Name of Employer (for Individual) ACTION PROPERTY MANAGEMENT		Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="493.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SCHUELER, PAUL, , MR.,			Date of Receipt
Mailing Address 6147 TRAILHEAD RD			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City LITTLETON	State CO	Zip Code 80130-5330	Transaction ID : SA11A.359727
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCHULTZ, AMY, , ,			Date of Receipt
Mailing Address 1209 DEVONSHIRE ROAD			<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City BUFFALO GROVE	State IL	Zip Code 60089-1125	Transaction ID : SA11A.359629
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="481.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4310 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHULTZ, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 DEVONSHIRE ROAD
 City BUFFALO GROVE State IL Zip Code 60089-1125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359631
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCHULTZ, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 DEVONSHIRE ROAD
 City BUFFALO GROVE State IL Zip Code 60089-1125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385905
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCHULTZ, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 DEVONSHIRE ROAD
 City BUFFALO GROVE State IL Zip Code 60089-1125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406064
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4311 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHULTE, ELAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7501 E THOMPSON PEAK PARKWAY UNIT

City SCOTTSDALE	State AZ	Zip Code 85255-4537
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.369434

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SCHULZ, GORDON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28600 FAIRWAY LANE
APT 216

City CHISAGO CITY	State MN	Zip Code 55013-9683
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.383529

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SCHULMAN, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3610 S. OCEAN BOULEVARD
208

City PALM BEACH	State FL	Zip Code 33480-5880
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
999.00

Date of Receipt
09 / 26 / 2016
Transaction ID : SA11A.407569

Amount of Each Receipt this Period
999.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1499.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4312 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHULZ, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 NORTHERN AVE.
 City FERGUS FALLS State MN Zip Code 56537-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDO EQUIPMENT Occupation (for Individual) PARTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357597
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHULZ, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 NORTHERN AVE.
 City FERGUS FALLS State MN Zip Code 56537-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDO EQUIPMENT Occupation (for Individual) PARTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382831
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHULZ, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 NORTHERN AVE.
 City FERGUS FALLS State MN Zip Code 56537-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDO EQUIPMENT Occupation (for Individual) PARTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392176
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4313 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHULZ, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 NORTHERN AVE.
 City FERGUS FALLS State MN Zip Code 56537-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDO EQUIPMENT Occupation (for Individual) PARTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392177
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHULZ, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 NORTHERN AVE.
 City FERGUS FALLS State MN Zip Code 56537-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDO EQUIPMENT Occupation (for Individual) PARTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413043
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHULTE, WILLIAM, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 CENTURY HILL
 City LOS ANGELES State CA Zip Code 90067-3515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406846
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4314 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHUMANN, ERIC, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7312 DOUGLAS AVENUE
 City RACINE State WI Zip Code 53402-9543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERIT GEAR Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391340
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SCHUMACHER, H., RICHARD, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 E 88TH STREET APT. 14A
 City NEW YORK State NY Zip Code 10128-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354078
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCHUMACHER, H., RICHARD, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 E 88TH STREET APT. 14A
 City NEW YORK State NY Zip Code 10128-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357892
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4315 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHUMACHER, H., RICHARD, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47 E 88TH STREET
APT. 14A

City NEW YORK State NY Zip Code 10128-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
08 / 15 / 2016
Transaction ID : SA11A.366015

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. SCHUMACHER, H., RICHARD, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47 E 88TH STREET
APT. 14A

City NEW YORK State NY Zip Code 10128-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
08 / 23 / 2016
Transaction ID : SA11A.376445

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHUMACHER, H., RICHARD, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47 E 88TH STREET
APT. 14A

City NEW YORK State NY Zip Code 10128-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt
09 / 13 / 2016
Transaction ID : SA11A.394791

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4316 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHUMANN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 N GREEN BAY RD
 City LAKE FOREST State IL Zip Code 60045-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374603
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHWARTZ, CHARLES, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 LOUISIANA ST STE 6800
 City HOUSTON State TX Zip Code 77002-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKADDEN ARPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367947
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SCHWARTZ, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 W ANN ARBOR TRAIL STE 2
 City PLYMOUTH State MI Zip Code 48170-1694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHWARTZ INVESTMENT COUNSEL INC Occupation (for Individual) INVESTMENT COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377848
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4317 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWARTZ, JAMES, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50885 WALDON PARK LANE
 City GRANGER State IN Zip Code 46530-7703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEHCO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408478
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHWARTZ, JAMES, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50885 WALDON PARK LANE
 City GRANGER State IN Zip Code 46530-7703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEHCO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408479
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHWARTZ , JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1228 AMALFI DRIVE
 City PACIFIC PALISADES State CA Zip Code 90272-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415477
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4318 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWAB, LOWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6255 MOHAWK DRIVE
 City CORCORAN State MN Zip Code 55340-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 597.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386689
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCHWAB, LOWELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6255 MOHAWK DRIVE
 City CORCORAN State MN Zip Code 55340-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 597.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403193
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCHWALBE, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3190 GATEWAY RD. SUITE 201
 City HARTLAND State WI Zip Code 53045-5167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEGRITY INVESTMENTS, INC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390272
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	365.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4319 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWALBE, RICHARD, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3190 GATEWAY RD. SUITE 201

City HARTLAND	State WI	Zip Code 53045-5167
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTEGRITY INVESTMENTS, INC	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390278

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHWALBE, RICHARD, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3190 GATEWAY RD. SUITE 201

City HARTLAND	State WI	Zip Code 53045-5167
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INTEGRITY INVESTMENTS, INC	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415877

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHWAB, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5123 E CALLE DEL NORTE

City PHOENIX	State AZ	Zip Code 85018-4427
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352559

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4320 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 346.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352033
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 346.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355267
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 346.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.373347
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	77.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4321 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375832
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401456
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

C. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409335
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	79.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4322 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SCHWARZENTRAUB, SARA, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11372 CALLE SIMPSON
 City EL CAJON State CA Zip Code 92019-4088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422885
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SCHWARZ, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 287 CORONA AVE
 City LONG BEACH State CA Zip Code 90803-1822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARROWHEAD PRODUCTS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413612
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4323 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHWEINSHAUT, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 SCHOOL STREET
 City ATTLEBORO State MA Zip Code 02703-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MS COMPANY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396229
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SCHWEDA, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N67W34981 IRELAND CT.
 City OCONOMOWOC State WI Zip Code 53066-1895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCEPT MACHINE WI. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374511
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCIFRES, DON, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26700 PALO HILLS DR.
 City LOS ALTOS HILLS State CA Zip Code 94022-1927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359054
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4324 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCIOLA, CHARLOTTE, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 KIMBALL AVE

City WENHAM	State MA	Zip Code 01984-1108
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352126

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SCIOLA, CHARLOTTE, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 KIMBALL AVE

City WENHAM	State MA	Zip Code 01984-1108
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356300

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. SCIOLA, CHARLOTTE, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 KIMBALL AVE

City WENHAM	State MA	Zip Code 01984-1108
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2016

Transaction ID : SA11A.383040

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4325 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCIOLA, CHARLOTTE, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 KIMBALL AVE
 City WENHAM State MA Zip Code 01984-1108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405949
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. SCIOSCIA, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 APPLEHILL CT
 City GIBSONIA State PA Zip Code 15044-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349363
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SCIOSCIA, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 APPLEHILL CT
 City GIBSONIA State PA Zip Code 15044-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374675
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2075.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4326 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCIOSCIA, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 APPLEHILL CT
 City GIBSONIA State PA Zip Code 15044-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399751
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SCOCIMARA, ERIBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAUREL LANE
 City GREENWICH State CT Zip Code 06830-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.348286
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SCOCIMARA, ERIBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAUREL LANE
 City GREENWICH State CT Zip Code 06830-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366596
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4327 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOCIMARA, ERIBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAUREL LANE
 City GREENWICH State CT Zip Code 06830-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398367
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. SCOCIMARA, ERIBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAUREL LANE
 City GREENWICH State CT Zip Code 06830-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407688
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. SCOCIMARA, ERIBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAUREL LANE
 City GREENWICH State CT Zip Code 06830-3846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407689
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4328 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SCOFIELD, JOHN, , ,		Date of Receipt MM / DD / YYYY 07 / 19 / 2016 Transaction ID : SA11A.348188
Mailing Address 227 C ST SE		Amount of Each Receipt this Period 2500.00
City WASHINGTON	State DC	Zip Code 20003-1910
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) S-3 GROUP	Occupation (for Individual) PRINCIPAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SCOGGIN, JAMES, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016 Transaction ID : SA11A.417054
Mailing Address PO BOX 25823		Amount of Each Receipt this Period 300.00
City HONOLULU	State HI	Zip Code 96825-0823
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCOPESI, GINO, , ,		Date of Receipt MM / DD / YYYY 08 / 04 / 2016 Transaction ID : SA11A.360968
Mailing Address 4 RADCLIFF COURT		Amount of Each Receipt this Period 250.00
City RANCHO MIRAGE	State CA	Zip Code 92270-3711
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	3050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4329 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350454
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357453
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359107
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4330 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2124 CARDINAL DRIVE

City SPRINGFIELD	State IL	Zip Code 62704-2206
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 03 / 2016

Transaction ID : SA11A.360300

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 43

City WINNSBORO	State TX	Zip Code 75494-0043
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4750.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016

Transaction ID : SA11A.366606

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 43

City WINNSBORO	State TX	Zip Code 75494-0043
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4750.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368220

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4331 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4750.00**

Date of Receipt
08 / 24 / 2016

Transaction ID : SA11A.378642

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4750.00**

Date of Receipt
08 / 24 / 2016

Transaction ID : SA11A.378643

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 43**

City **WINNSBORO** State **TX** Zip Code **75494-0043**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **4750.00**

Date of Receipt
08 / 30 / 2016

Transaction ID : SA11A.384855

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4332 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384856
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390596
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392161
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4333 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2124 CARDINAL DRIVE

City SPRINGFIELD	State IL	Zip Code 62704-2206
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : SA11A.392711

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 43

City WINNSBORO	State TX	Zip Code 75494-0043
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11A.407804

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SCOTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 43

City WINNSBORO	State TX	Zip Code 75494-0043
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2016

Transaction ID : SA11A.409095

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4334 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2124 CARDINAL DRIVE
 City SPRINGFIELD State IL Zip Code 62704-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414565
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417819
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417861
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4335 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, EDWARD, R., MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6003 TUSCANY VILLAGE

City AMARILLO	State TX	Zip Code 79119-6554
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : SA11A.353534

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SCOTT, EDWARD, R., MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6003 TUSCANY VILLAGE

City AMARILLO	State TX	Zip Code 79119-6554
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016

Transaction ID : SA11A.372301

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SCOTT, EDWARD, R., MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6003 TUSCANY VILLAGE

City AMARILLO	State TX	Zip Code 79119-6554
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPMENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11A.380688

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4336 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCOTT, EDWARD, R., MR., JR

Mailing Address **6003 TUSCANY VILLAGE**

City AMARILLO	State TX	Zip Code 79119-6554
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 12 / 2016

Transaction ID : SA11A.393617

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCOTT, EDWARD, R., MR., JR

Mailing Address **6003 TUSCANY VILLAGE**

City AMARILLO	State TX	Zip Code 79119-6554
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE DEVELOPMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 19 / 2016

Transaction ID : SA11A.399455

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCOTT, HENRY, C., ,

Mailing Address **PO BOX 535**

City ALLENDALE	State SC	Zip Code 29810-0535
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLLUM LUMBER CO.	Occupation (for Individual) EXECUTIVE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
75000.00

Date of Receipt
08 / 26 / 2016

Transaction ID : SA11A.379108

Amount of Each Receipt this Period
75000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4337 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 ROSEDALE TERRSCE
 City CRETE State IL Zip Code 60417-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373179
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCOTT, HUGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 ROSEDALE TERRSCE
 City CRETE State IL Zip Code 60417-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373183
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCOTT, SHERMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 129
 City BROUSSARD State LA Zip Code 70518-0129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERMAN SCOTT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415885
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4338 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 524 SOUTH GRANADOS AVE

City SOLANA BEACH	State CA	Zip Code 92075-2017
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOLANA RESOURCES	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382277

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SCOTT, YVONNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.BOX 11356

City BURKE	State VA	Zip Code 22009-1356
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
381.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356294

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

C. SCOTT, YVONNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O.BOX 11356

City BURKE	State VA	Zip Code 22009-1356
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
381.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374408

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	327.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 4339 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCOTT, YVONNE, , ,

Mailing Address **P.O.BOX 11356**

City **BURKE** State **VA** Zip Code **22009-1356**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **381.00**

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374409

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCOTT, YVONNE, , ,

Mailing Address **P.O.BOX 11356**

City **BURKE** State **VA** Zip Code **22009-1356**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **381.00**

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415962

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCOTT, YVONNE, , ,

Mailing Address **P.O.BOX 11356**

City **BURKE** State **VA** Zip Code **22009-1356**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **381.00**

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415965

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4340 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOWBY, RONALD, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 LOCUST HILL
 City FRANKFORT State KY Zip Code 40601-4824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409124
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SCRUGGS , WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 CALLE GALISTEO
 City SANTA FE State NM Zip Code 87508-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383811
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SCRUGGS , WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 CALLE GALISTEO
 City SANTA FE State NM Zip Code 87508-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405817
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4341 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCRUGGS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 CALLE GALISTEO
 City SANTA FE State NM Zip Code 87508-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405833
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SCRUGGS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 CALLE GALISTEO
 City SANTA FE State NM Zip Code 87508-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418400
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SCRUGGS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 CALLE GALISTEO
 City SANTA FE State NM Zip Code 87508-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418409
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4342 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCUDDER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 HIGH CIRCLE DR

City IOWA CITY	State IA	Zip Code 52240-7935
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF IOWA	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SA11A.379823

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SCUDDER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 HIGH CIRCLE DR

City IOWA CITY	State IA	Zip Code 52240-7935
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF IOWA	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.382005

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SCUDDER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 HIGH CIRCLE DR

City IOWA CITY	State IA	Zip Code 52240-7935
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF IOWA	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA11A.382009

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4343 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SCUDDER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 HIGH CIRCLE DR

City IOWA CITY	State IA	Zip Code 52240-7935
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF IOWA	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.405951

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SCUDDER, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 HIGH CIRCLE DR

City IOWA CITY	State IA	Zip Code 52240-7935
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIVERSITY OF IOWA	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407791

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SCULLY, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 W SOUTHWINDS BOULEVARD
APT 213

City VERO BEACH	State FL	Zip Code 32963-4335
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389691

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4344 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCULLY, WILLIAM, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 771 MANATEE COVE
 City VERO BEACH State FL Zip Code 32963-3730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398538
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SEAMN, DAVID, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 RYDALMOUNT ROAD
 City LOCKPORT State NY Zip Code 14094-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387570
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SEARBROOK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 POLK LANE
 City BRIDGETON State NJ Zip Code 08302-5902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 08 / 2016
Transaction ID : SA11A.346018
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4345 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEARS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 E SUMMER MEADOW CIRCLE
 City SANDY State UT Zip Code 84093-7010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350476
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SEARS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 E SUMMER MEADOW CIRCLE
 City SANDY State UT Zip Code 84093-7010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.365012
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SEARS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 E SUMMER MEADOW CIRCLE
 City SANDY State UT Zip Code 84093-7010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368717
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4346 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SEARS, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 ROCKY SHORE ROAD
 City LAKE GEORGE State NY Zip Code 12845-5303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358313
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SEARS, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 ROCKY SHORE ROAD
 City LAKE GEORGE State NY Zip Code 12845-5303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374630
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SEARS, H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 ROCKY SHORE ROAD
 City LAKE GEORGE State NY Zip Code 12845-5303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382453
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4347 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEAVER, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 WILLOWICK ROAD
 City HOUSTON State TX Zip Code 77027-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392249
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SEELING, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 NORTHSTAR PLACE
 City WILMINGTON State NC Zip Code 28405-4260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368675
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SEELING, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 NORTHSTAR PLACE
 City WILMINGTON State NC Zip Code 28405-4260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381004
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4348 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEELING, ROBERT, , ,

Mailing Address **2000 NORTHSTAR PLACE**

City **WILMINGTON** State **NC** Zip Code **28405-4260**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
09 / 13 / 2016

Transaction ID : SA11A.394133

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEELING, ROBERT, , ,

Mailing Address **2000 NORTHSTAR PLACE**

City **WILMINGTON** State **NC** Zip Code **28405-4260**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
09 / 13 / 2016

Transaction ID : SA11A.394139

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEELING, ROBERT, , ,

Mailing Address **2000 NORTHSTAR PLACE**

City **WILMINGTON** State **NC** Zip Code **28405-4260**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
09 / 13 / 2016

Transaction ID : SA11A.394140

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **150.00**

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4349 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEGEL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4672 MAURA LANE
 City W. BLOOMFIELD State MI Zip Code 48323-3627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAST POINTE RADIOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351108
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. SEGEL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4672 MAURA LANE
 City W. BLOOMFIELD State MI Zip Code 48323-3627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAST POINTE RADIOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379486
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. SEIBEL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 QUARRY DRIVE
 City WOODLAND PARK State NJ Zip Code 07424-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354476
 Amount of Each Receipt this Period
 55.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	555.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4350 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIBEL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 QUARRY DRIVE
 City WOODLAND PARK State NJ Zip Code 07424-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379971
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. SEIBEL, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 QUARRY DRIVE
 City WOODLAND PARK State NJ Zip Code 07424-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408669
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

C. SEIDERS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 N WEST ST.
 City DOYLESTOWN State PA Zip Code 18901-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4351 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SEIDERS, GREG, , ,

Mailing Address 212 N WEST ST.

City DOYLESTOWN	State PA	Zip Code 18901-3522
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350506

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SEIDERS, GREG, , ,

Mailing Address 212 N WEST ST.

City DOYLESTOWN	State PA	Zip Code 18901-3522
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.363034

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SEIDERS, GREG, , ,

Mailing Address 212 N WEST ST.

City DOYLESTOWN	State PA	Zip Code 18901-3522
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2016

Transaction ID : SA11A.376097

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4352 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIDERS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 N WEST ST.
 City DOYLESTOWN State PA Zip Code 18901-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 05 / 2016
Transaction ID : SA11A.389119
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SEIDERS, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 N WEST ST.
 City DOYLESTOWN State PA Zip Code 18901-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400832
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SEIFERTH, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 LAUREL PLACE
 City SAN ANTONIO State TX Zip Code 78209-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354525
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4353 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SEIFERTH, ELEANOR, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2016
Mailing Address 12 LAUREL PLACE		Transaction ID : SA11A.360234
City SAN ANTONIO	State TX	Zip Code 78209-1853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SEIFERTH, ELEANOR, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 31 / 2016
Mailing Address 12 LAUREL PLACE		Transaction ID : SA11A.388280
City SAN ANTONIO	State TX	Zip Code 78209-1853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SEIFERTH, ELEANOR, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 12 LAUREL PLACE		Transaction ID : SA11A.418611
City SAN ANTONIO	State TX	Zip Code 78209-1853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4354 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEIFERTH, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 LAUREL PLACE
 City SAN ANTONIO State TX Zip Code 78209-1853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418612
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SEITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6641 DEARBORN DRIVE
 City MISSION State KS Zip Code 66202-4246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370918
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SELFRIDGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 VALLEY VISTA DR
 City CAMARILLO State CA Zip Code 93010-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1147.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344435
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4355 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SELFRIDGE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 VALLEY VISTA DR

City CAMARILLO	State CA	Zip Code 93010-1634
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1147.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.359005

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. SELFRIDGE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 VALLEY VISTA DR

City CAMARILLO	State CA	Zip Code 93010-1634
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1147.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387849

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. SELFRIDGE, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 VALLEY VISTA DR

City CAMARILLO	State CA	Zip Code 93010-1634
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1147.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.393816

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4356 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SELKE, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 944 CHASE COURT

City GURNEE State IL Zip Code 60031-3123

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401040

Amount of Each Receipt this Period 3000.00

Memo Item CONTRIBUTION

B. SELLERS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 SOUTH MAIN STREET

City HANOVER State NH Zip Code 03755-2044

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415498

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. SELLERS, ROBERT, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1338

City BOCA GRANDE State FL Zip Code 33921-1338

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411787

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4357 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SEMMLER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 FARM LAKE VIEW
 City JOHNS ISLAND State SC Zip Code 29455-5943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOTEL MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403163
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SENN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8892 ASHGROVE HOUSE LN
 City VIENNA State VA Zip Code 22182-5550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390444
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SENN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8892 ASHGROVE HOUSE LN
 City VIENNA State VA Zip Code 22182-5550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409507
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4358 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SENN, WILLIAM, , ,

Mailing Address **8892 ASHGROVE HOUSE LN**

City VIENNA	State VA	Zip Code 22182-5550
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.410930

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SENN, WILLIAM, , ,

Mailing Address **8892 ASHGROVE HOUSE LN**

City VIENNA	State VA	Zip Code 22182-5550
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.410931

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SENSKE, PAMELA, , ,

Mailing Address **4720 E. WILLOW SPRINGS ROAD**

City SPOKANE	State WA	Zip Code 99223-9607
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PEARSON PACKAGING SYSTEMS	Occupation (for Individual) CHAIRMAN OF THE BOARD
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.421970

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4359 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

Transaction ID : SA11A.346846

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352339

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

C. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.352614

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4360 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENTHAVONG, BOUNCHANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8106 VIOLA ST
 City SPRINGFIELD State VA Zip Code 22152-3626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352633
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SENTHAVONG, BOUNCHANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8106 VIOLA ST
 City SPRINGFIELD State VA Zip Code 22152-3626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352639
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SENTHAVONG, BOUNCHANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8106 VIOLA ST
 City SPRINGFIELD State VA Zip Code 22152-3626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364390
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4361 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENTHAVONG, BOUNCHANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8106 VIOLA ST
 City SPRINGFIELD State VA Zip Code 22152-3626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376115
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SENTHAVONG, BOUNCHANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8106 VIOLA ST
 City SPRINGFIELD State VA Zip Code 22152-3626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391857
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SENTHAVONG, BOUNCHANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8106 VIOLA ST
 City SPRINGFIELD State VA Zip Code 22152-3626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391858
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4362 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394022

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SENTHAVONG, BOUNCHANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8106 VIOLA ST

City SPRINGFIELD	State VA	Zip Code 22152-3626
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400896

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SERRAINO, JOANNE, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 HARRISON AVENUE

City HARBROUCK HEIGHTS	State NJ	Zip Code 07604-1604
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352354

Amount of Each Receipt this Period
85.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4363 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.351005
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt **08 / 02 / 2016**
Transaction ID : SA11A.360131
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.380087
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4364 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT	State AZ	Zip Code 86301-4450
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.389341

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT	State AZ	Zip Code 86301-4450
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.392209

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT	State AZ	Zip Code 86301-4450
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11A.396703

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4365 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SETZER, EDWIN, P., MR.,		Date of Receipt MM / DD / YYYY 09 / 14 / 2016
Mailing Address 1483 NORTHRIDGE DRIVE		Transaction ID : SA11A.396704
City PRESCOTT	State AZ	Zip Code 86301-4450
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SETZER, EDWIN, P., MR.,		Date of Receipt MM / DD / YYYY 09 / 23 / 2016
Mailing Address 1483 NORTHRIDGE DRIVE		Transaction ID : SA11A.404824
City PRESCOTT	State AZ	Zip Code 86301-4450
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SETZER, EDWIN, P., MR.,		Date of Receipt MM / DD / YYYY 09 / 27 / 2016
Mailing Address 1483 NORTHRIDGE DRIVE		Transaction ID : SA11A.410387
City PRESCOTT	State AZ	Zip Code 86301-4450
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 407.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4366 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1483 NORTHRIDGE DRIVE
City PRESCOTT State AZ Zip Code 86301-4450
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 407.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416949
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SEVILLA-SACASA, EUGENIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 460 SOLANO PRADO
City CORAL GABLES State FL Zip Code 33156-2356
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RYDER Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368264
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SGEFFUELD, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1740 VIEW POINT DRIVE
City ST. GEORGE State UT Zip Code 84790-6344
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357596
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4367 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SGEFFUELD, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1740 VIEW POINT DRIVE
 City ST. GEORGE State UT Zip Code 84790-6344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382806
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348828
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348832
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4368 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355458
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359891
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372175
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 109.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4369 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.374032
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384746
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392171
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 139.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4370 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392172
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILARY FIRE ALARM CO.. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419621
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. SHACKFORD, JOSEPH, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5454
 City INCLINE VILLAGE State NV Zip Code 89450-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TRAINER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362789
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 589.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4371 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKELFORD-DAVIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 HULL AVE

City WEBSTER GROVES	State MO	Zip Code 63119-2223
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) KEB CPA	Occupation (for Individual) ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016
Transaction ID : SA11A.363183

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. SHACKELFORD-DAVIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 HULL AVE

City WEBSTER GROVES	State MO	Zip Code 63119-2223
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) KEB CPA	Occupation (for Individual) ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016
Transaction ID : SA11A.390335

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SHAFER, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 MINEAR DRIVE

City LIBERTYVILLE	State IL	Zip Code 60048-1676
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016
Transaction ID : SA11A.369635

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4372 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAFFER, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 E. MINERAL PL.
 City CENTENNIAL State CO Zip Code 80122-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 09 / 2016**
Transaction ID : SA11A.346622
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHAFFER, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 E. MINERAL PL.
 City CENTENNIAL State CO Zip Code 80122-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.352022
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SHAFFER, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 E. MINERAL PL.
 City CENTENNIAL State CO Zip Code 80122-2909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357212
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4373 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353292
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380664
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386994
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4374 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386996
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390881
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401209
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4375 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAH, SATISH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6361 SE HARBOR CIRCLE
 City STUART State FL Zip Code 34996-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410390
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHAIKH, IQBAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7632 FOUR WINDS DR
 City FORT WORTH State TX Zip Code 76133-7566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IQBAL M SHAIKH Occupation (for Individual) TECHNICAL SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353713
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHAIKH, IQBAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7632 FOUR WINDS DR
 City FORT WORTH State TX Zip Code 76133-7566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IQBAL M SHAIKH Occupation (for Individual) TECHNICAL SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384181
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4376 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAKAR, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5248 BALDWIN LANE
 City MARIETTA State GA Zip Code 30068-1576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERITIV Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.354471
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHAKAR, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5248 BALDWIN LANE
 City MARIETTA State GA Zip Code 30068-1576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERITIV Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt **08 / 21 / 2016**
Transaction ID : SA11A.375787
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHAKAR, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5248 BALDWIN LANE
 City MARIETTA State GA Zip Code 30068-1576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERITIV Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.379987
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4377 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAKAR, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5248 BALDWIN LANE
 City MARIETTA State GA Zip Code 30068-1576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERITIV Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382229
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHAKAR, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5248 BALDWIN LANE
 City MARIETTA State GA Zip Code 30068-1576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERITIV Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.412404
 Amount of Each Receipt this Period 38.00
 Memo Item CONTRIBUTION

C. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.347548
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 73.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4378 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348606
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352224
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364969
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4379 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372725
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384601
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407877
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4380 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408554
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417363
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

C. SHALE, R., ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CHRISTI CIRCLE
 City BEAVERCREEK State OH Zip Code 45434-6376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418878
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4381 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHALOM, ASHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 E BOYLE AVE

City LOS ANGELES	State CA	Zip Code 90023-1269
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASHER CONCEPTS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.373341

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SHALOM, ASHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 E BOYLE AVE

City LOS ANGELES	State CA	Zip Code 90023-1269
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASHER CONCEPTS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.373342

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SHALOM, ASHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 E BOYLE AVE

City LOS ANGELES	State CA	Zip Code 90023-1269
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASHER CONCEPTS	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 17 / 2016
Transaction ID : SA11A.400183

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4382 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHANAHAN, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9554 PENDIO CT
 City HIGHLANDS RANCH State CO Zip Code 80126-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359593
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHANAHAN, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9554 PENDIO CT
 City HIGHLANDS RANCH State CO Zip Code 80126-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380183
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHANAHAN, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9554 PENDIO CT
 City HIGHLANDS RANCH State CO Zip Code 80126-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386948
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4383 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHANAHAN, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9554 PENDIO CT
 City HIGHLANDS RANCH State CO Zip Code 80126-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409026
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHANKS, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 GRAND AVENUE
 City SUWANEE State GA Zip Code 30024-4207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406878
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SHANNON, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 WOODRIDGE
 City BROOKFIELD State WI Zip Code 53005-6429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSTELLATION Occupation (for Individual) SLS MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364755
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4384 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHANNON, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 WOODRIDGE
 City BROOKFIELD State WI Zip Code 53005-6429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSTELLATION Occupation (for Individual) SLS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372443
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. SHANNON, THOMAS, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 E 19TH STREET APT 4W
 City NEW YORK State NY Zip Code 10003-2412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAMF Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388874
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. SHAPIRO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 TOWLSTON ROAD
 City MCLEAN State VA Zip Code 22102-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYMAN PHELPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1525.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359911
 Amount of Each Receipt this Period 247.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1297.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4385 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAPIRO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 TOWLSTON ROAD
 City MCLEAN State VA Zip Code 22102-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYMAN PHELPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1525.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372865
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHAPIRO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 TOWLSTON ROAD
 City MCLEAN State VA Zip Code 22102-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYMAN PHELPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1525.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372867
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHAPIRO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 TOWLSTON ROAD
 City MCLEAN State VA Zip Code 22102-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYMAN PHELPS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1525.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384782
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 397.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4386 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SHAPIRO, JEFFREY, , ,		Date of Receipt MM / DD / YYYY 09 / 02 / 2016 Transaction ID : SA11A.389296
Mailing Address 1325 13TH STREET NW 26		Amount of Each Receipt this Period 1000.00
City WASHINGTON	State DC	Zip Code 20005-4431
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) PECKMADIGANJONES	Occupation (for Individual) CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SHAPIRO, JEFFREY, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2016 Transaction ID : SA11A.399915
Mailing Address 1133 TOWLSTON ROAD		Amount of Each Receipt this Period 100.00
City MCLEAN	State VA	Zip Code 22102-1123
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HYMAN PHELPS	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SHAPIRO, JEFFREY, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016 Transaction ID : SA11A.419593
Mailing Address 1133 TOWLSTON ROAD		Amount of Each Receipt this Period 247.00
City MCLEAN	State VA	Zip Code 22102-1123
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HYMAN PHELPS	Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1525.00	

SUBTOTAL of Receipts This Page (optional).....▶	1347.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4387 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHARKEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20900 GEORGE HUNT CIRCLE #538
 538
 City WAUKESHA State WI Zip Code 53186-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347532
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. SHARKEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20900 GEORGE HUNT CIRCLE #538
 538
 City WAUKESHA State WI Zip Code 53186-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347533
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SHARKEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20900 GEORGE HUNT CIRCLE #538
 538
 City WAUKESHA State WI Zip Code 53186-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366773
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4388 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHARP, M., L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 8613**
 City **HORSESHOE BAY** State **TX** Zip Code **78657-8613**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2016
Transaction ID : SA11A.392407
 Amount of Each Receipt this Period
500.00
 Memo Item
CONTRIBUTION

B. SHARPE, RAYMOND, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **26221 N 114TH ST**
 City **SCOTTSDALE** State **AZ** Zip Code **85255-8274**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2016
Transaction ID : SA11A.357975
 Amount of Each Receipt this Period
50.00
 Memo Item
CONTRIBUTION

C. SHARPE, RAYMOND, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **26221 N 114TH ST**
 City **SCOTTSDALE** State **AZ** Zip Code **85255-8274**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 29 / 2016
Transaction ID : SA11A.382478
 Amount of Each Receipt this Period
50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4389 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHARPE, RAYMOND, , MR.,

Mailing Address **26221 N 114TH ST**

City SCOTTSDALE	State AZ	Zip Code 85255-8274
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.416155

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHARPE, S.H., , MR.,

Mailing Address **4 49TH AVENUE**

City ISLE OF PALMS	State SC	Zip Code 29451-2609
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 23 / 2016

Transaction ID : SA11A.406526

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHARP, STEVE, , ,

Mailing Address **3605 NW BLISS RD**

City VANCOUVER	State WA	Zip Code 98685-1512
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
09 / 01 / 2016

Transaction ID : SA11A.387975

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4390 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHARP, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8151 SILVER LAKE DRIVE
 City ORLAND PARK State IL Zip Code 60462-2922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391401
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SHAVER, BARBARA, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 AUTUMN ASH DRIVE
 City CONROE State TX Zip Code 77302-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 443.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344351
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. SHAVER, BARBARA, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 AUTUMN ASH DRIVE
 City CONROE State TX Zip Code 77302-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 443.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344353
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1118.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4391 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAVER, BARBARA, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 AUTUMN ASH DRIVE
 City CONROE State TX Zip Code 77302-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385694
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHAVER, BARBARA, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 AUTUMN ASH DRIVE
 City CONROE State TX Zip Code 77302-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390989
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHAVER, BARBARA, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 AUTUMN ASH DRIVE
 City CONROE State TX Zip Code 77302-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409370
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4392 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAVER, BARBARA, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 AUTUMN ASH DRIVE
 City CONROE State TX Zip Code 77302-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409373
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHAVER, BARBARA, N., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13282 AUTUMN ASH DRIVE
 City CONROE State TX Zip Code 77302-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417939
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE
 City COLTS NECK State NJ Zip Code 07722-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349693
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4393 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE

City COLTS NECK	State NJ	Zip Code 07722-2121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 08 / 04 / 2016
Transaction ID : SA11A.362325

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

B. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE

City COLTS NECK	State NJ	Zip Code 07722-2121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384410

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

C. SHAW, ALAN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 HAMBLETONIAN DRIVE

City COLTS NECK	State NJ	Zip Code 07722-2121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 09 / 04 / 2016
Transaction ID : SA11A.389178

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4394 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAW, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 DOUGLAS
 City MABANK State TX Zip Code 75156-6829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHAW & ASSOCIATES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354675
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SHAW, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 DOUGLAS
 City MABANK State TX Zip Code 75156-6829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHAW & ASSOCIATES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377444
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SHAW, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 DOUGLAS
 City MABANK State TX Zip Code 75156-6829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHAW & ASSOCIATES Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.405129
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4395 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHAW, F. BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 BEAR CREEK ROAD
 City ELIZABETHTOWN State PA Zip Code 17022-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WENGER GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417040
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

B. SHAW, JULIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 CHATEAUX
 City FENTON State MI Zip Code 48430-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358266
 Amount of Each Receipt this Period 36.00
 Memo Item CONTRIBUTION

C. SHAW, JULIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 CHATEAUX
 City FENTON State MI Zip Code 48430-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365846
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5461.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4396 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHAW, JULIUS, , ,

Mailing Address **44 CHATEAUX**

City FENTON	State MI	Zip Code 48430-
-----------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.00

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.374877

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHAW, JULIUS, , ,

Mailing Address **44 CHATEAUX**

City FENTON	State MI	Zip Code 48430-
-----------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.00

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.382494

Amount of Each Receipt this Period
36.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHAW, JULIUS, , ,

Mailing Address **44 CHATEAUX**

City FENTON	State MI	Zip Code 48430-
-----------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
326.00

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.416166

Amount of Each Receipt this Period
36.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	122.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4397 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350680
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388430
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388434
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4398 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 17 / 2016
Transaction ID : SA11A.400006
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405825
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405826
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4399 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405847
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405848
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHEA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9427 KATELYN COURT
 City MANASSAS PARK State VA Zip Code 20111-3043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.419308
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4400 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEA, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 BARRINGTON PLACE
 City MISHAWAKA State IN Zip Code 46545-8906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.348091
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHEA, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 BARRINGTON PLACE
 City MISHAWAKA State IN Zip Code 46545-8906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : SA11A.364206
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. SHEARMAN, KATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 POMEORY RD
 City MADISON State NJ Zip Code 07940-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UMS GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358304
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4401 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEARMAN, KATE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 99 POMEORY RD

City MADISON	State NJ	Zip Code 07940-2639
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UMS GROUP	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382448

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SHEARMAN, KATE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 99 POMEORY RD

City MADISON	State NJ	Zip Code 07940-2639
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UMS GROUP	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400914

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SHEARMAN, KATE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 99 POMEORY RD

City MADISON	State NJ	Zip Code 07940-2639
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UMS GROUP	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.416113

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4402 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEEHAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 292 KANAPALI DRIVE
 City NAPA State CA Zip Code 94558-1523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411747
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. SHEEL, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 TRUENO AVENUE
 City CAMARILLO State CA Zip Code 93010-1060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360961
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. SHEEL, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 652 TRUENO AVENUE
 City CAMARILLO State CA Zip Code 93010-1060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383274
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4403 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHEERON, CHRISTOPHER, , ,

Mailing Address **200 HENRY STREET, APT 2107**

City **STAMFORD** State **CT** Zip Code **06902-5876**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RSR PARTNERS** Occupation (for Individual) **SENIOR DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
07 / 12 / 2016
Transaction ID : SA11A.346975

Amount of Each Receipt this Period
325.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHEETS, CHARLES, , ,

Mailing Address **58 PACES LAKES OVERLOOK**

City **DALLAS** State **GA** Zip Code **30157-1764**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **206.00**

Date of Receipt
07 / 31 / 2016
Transaction ID : SA11A.359539

Amount of Each Receipt this Period
38.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHEETS, CHARLES, , ,

Mailing Address **58 PACES LAKES OVERLOOK**

City **DALLAS** State **GA** Zip Code **30157-1764**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **206.00**

Date of Receipt
07 / 31 / 2016
Transaction ID : SA11A.359542

Amount of Each Receipt this Period
38.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **401.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4404 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEETS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 PACES LAKES OVERLOOK
 City DALLAS State GA Zip Code 30157-1764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388863
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHEETS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 PACES LAKES OVERLOOK
 City DALLAS State GA Zip Code 30157-1764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422343
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SHEETS, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 1ST AVENUE
 City GALLIPOLIS State OH Zip Code 45631-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351189
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4405 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEETS, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 1ST AVENUE

City GALLIPOLIS	State OH	Zip Code 45631-1006
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375222

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SHELDON, LOUIS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2737 W. SAVOY PLACE

City ANAHEIM	State CA	Zip Code 92804-2017
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRADITIONAL VALUES COALITION	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
631.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409426

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. SHELDON, LOUIS, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2737 W. SAVOY PLACE

City ANAHEIM	State CA	Zip Code 92804-2017
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRADITIONAL VALUES COALITION	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
631.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409432

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4406 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHELDON, LOUIS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2737 W. SAVOY PLACE

City ANAHEIM	State CA	Zip Code 92804-2017
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRADITIONAL VALUES COALITION	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
631.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409434

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SHELDON, LOUIS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2737 W. SAVOY PLACE

City ANAHEIM	State CA	Zip Code 92804-2017
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRADITIONAL VALUES COALITION	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
631.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409435

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SHELK, STUART, J., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8843 SW POKEGAMA DR

City POWELL BUTTE	State OR	Zip Code 97753-1667
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OCHOCO LUMBER CO	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367883

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4407 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHELTON, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 RIVERWOOD

City BOERNE	State TX	Zip Code 78006-6048
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381987

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SHELTON, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 RIVERWOOD

City BOERNE	State TX	Zip Code 78006-6048
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381996

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SHELTON, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 RIVERWOOD

City BOERNE	State TX	Zip Code 78006-6048
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11A.389282

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4408 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHELTON, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 RIVERWOOD
 City BOERNE State TX Zip Code 78006-6048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416193
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHEPARD, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1263 TOURMALINE ST.
 City SAN DIEGO State CA Zip Code 92109-1857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEROPERABLE SYSTEMS Occupation (for Individual) INTEROPERABLE SYSTEMS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358375
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SHEPARD, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1263 TOURMALINE ST.
 City SAN DIEGO State CA Zip Code 92109-1857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEROPERABLE SYSTEMS Occupation (for Individual) INTEROPERABLE SYSTEMS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358386
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4409 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPARD, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1263 TOURMALINE ST.
 City SAN DIEGO State CA Zip Code 92109-1857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEROPERABLE SYSTEMS Occupation (for Individual) INTEROPERABLE SYSTEMS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382498
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHEPHERD-FREY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 FISHER FIELD RD
 City BLAIRSVILLE State GA Zip Code 30512-7752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348373
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHEPHERD-FREY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 FISHER FIELD RD
 City BLAIRSVILLE State GA Zip Code 30512-7752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402490
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4410 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SHEPHERD-FREY, CAROL, , ,		Date of Receipt
Mailing Address 636 FISHER FIELD RD		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City BLAIRSVILLE	State GA	Zip Code 30512-7752
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.402500
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="550.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SHEPHERD, CASSANDRA, , ,		Date of Receipt
Mailing Address 3519 ESTATES RD		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2016"/>
City TALLAHASSEE	State FL	Zip Code 32305-6948
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.404743
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SHEPHERD, CASSANDRA, , ,		Date of Receipt
Mailing Address 3519 ESTATES RD		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City TALLAHASSEE	State FL	Zip Code 32305-6948
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.417620
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4411 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPHERD, CASSANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3519 ESTATES RD

City TALLAHASSEE	State FL	Zip Code 32305-6948
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418447

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. SHEPHERD, CASSANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3519 ESTATES RD

City TALLAHASSEE	State FL	Zip Code 32305-6948
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418991

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. SHEPHARD, GERALDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 DRIFTWOOD LANE

City LARGO	State FL	Zip Code 33770-2602
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHEPHARD'S BEACH RESORT	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374362

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4412 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPHARD, GERALDINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 DRIFTWOOD LANE

City LARGO	State FL	Zip Code 33770-2602
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHEPHARD'S BEACH RESORT	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384620

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SHEPHERD, SHELLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14240 EVERGREEN TRAIL

City MANITOU BEACH	State MI	Zip Code 49253-9702
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DOCTOR OF CHIROPRACTIC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2016

Transaction ID : SA11A.344446

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. SHEPHERD, SHELLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14240 EVERGREEN TRAIL

City MANITOU BEACH	State MI	Zip Code 49253-9702
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DOCTOR OF CHIROPRACTIC
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
209.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11A.355498

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4413 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPHERD, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14240 EVERGREEN TRAIL
 City MANITOU BEACH State MI Zip Code 49253-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DOCTOR OF CHIROPRACTIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418289
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHEPHERD, SHELLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14240 EVERGREEN TRAIL
 City MANITOU BEACH State MI Zip Code 49253-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DOCTOR OF CHIROPRACTIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418295
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHEPHERD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 BREAKWATER DRIVE
 City FORT COLLINS State CO Zip Code 80525-3345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346877
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4414 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEPHERD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 BREAKWATER DRIVE
 City FORT COLLINS State CO Zip Code 80525-3345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCLLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360135
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. SHERIDAN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 KNOLLWOOD
 City SHORT HILLS State NJ Zip Code 07078-2836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FRANCHISEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364933
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. SHERIDAN BOETTGER, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23711 EASTSIDE RD
 City WILLITS State CA Zip Code 95490-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER/RET ANESTHITEST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352425
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4415 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHERIDAN BOETTGER, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23711 EASTSIDE RD
 City WILLITS State CA Zip Code 95490-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER/RET ANESTHITEST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356265
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. SHERIDAN BOETTGER, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23711 EASTSIDE RD
 City WILLITS State CA Zip Code 95490-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER/RET ANESTHITEST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.383018
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SHERIDAN BOETTGER, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23711 EASTSIDE RD
 City WILLITS State CA Zip Code 95490-5712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER/RET ANESTHITEST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386369
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4416 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHERIDAN BOETTGER, LOIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23711 EASTSIDE RD

City WILLITS	State CA	Zip Code 95490-5712
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER/RET ANESTHITEST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386372

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SHERIDAN BOETTGER, LOIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23711 EASTSIDE RD

City WILLITS	State CA	Zip Code 95490-5712
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER/RET ANESTHITEST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411275

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. SHERMAN, CLEONE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4403 PIONEER RD SE
324

City ALEXANDRIA	State MN	Zip Code 56308-9226
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.356421

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4417 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHERMAN, CLEONE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4403 PIONEER RD SE
324

City ALEXANDRIA State MN Zip Code 56308-9226

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2016

Transaction ID : SA11A.363259

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SHERMAN, CLEONE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4403 PIONEER RD SE
324

City ALEXANDRIA State MN Zip Code 56308-9226

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.388576

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SHERMAN, CLEONE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4403 PIONEER RD SE
324

City ALEXANDRIA State MN Zip Code 56308-9226

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.388577

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4418 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHERMAN, CLEONE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 PIONEER RD SE
 324
 City ALEXANDRIA State MN Zip Code 56308-9226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405612
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHERMAN, CLEONE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 PIONEER RD SE
 324
 City ALEXANDRIA State MN Zip Code 56308-9226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405613
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHERMAN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 254 COLEGE LANE
 City MOBILE State AL Zip Code 36608-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381116
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4419 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHERMAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3514 N. LINDER AV.
 City CHICAGO State IL Zip Code 60641-3251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375666
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHERMAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3514 N. LINDER AV.
 City CHICAGO State IL Zip Code 60641-3251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390930
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHERMAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3514 N. LINDER AV.
 City CHICAGO State IL Zip Code 60641-3251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390931
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4420 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEW, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 ED CIDER MILL RD

City COLUMBIA CITY	State IN	Zip Code 46725-
-----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) J&K COMMUNICATIONS INC	Occupation (for Individual) COB
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398896

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SHEW, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3362 N GAVIOLA AVE

City MERIDIAN	State ID	Zip Code 83646-7775
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407795

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SHEWELL, TANYA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3023 MEADOW LAKES DR

City WATKINSVILLE	State GA	Zip Code 30677-4988
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.356226

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4421 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364925
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372656
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387132
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4422 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.387133
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396761
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408358
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4423 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHEWELL, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3023 MEADOW LAKES DR
 City WATKINSVILLE State GA Zip Code 30677-4988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419412
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHI, CHRISTIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SW BOWERMAN DR
 City BEAVERTON State OR Zip Code 97005-0979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367890
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. SHIBLEY, JAMES, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 OLSON WAY UNIT 619 UNIT 619
 City SUNNYVALE State CA Zip Code 94086-6594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361423
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4424 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIELY, JOHN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15270 BRIARIDGE CT
City ELM GROVE State WI Zip Code 53122-2003
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398461
Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SHIELDS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1077 PONTE VEDRA BLVD
City PONTE VEDRA BEACH State FL Zip Code 32082-4016
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403943
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHIELDS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1077 PONTE VEDRA BLVD
City PONTE VEDRA BEACH State FL Zip Code 32082-4016
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403950
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4425 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIELDS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1077 PONTE VEDRA BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-4016
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407446

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SHIELDS, PATRICIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1077 PONTE VEDRA BLVD

City PONTE VEDRA BEACH	State FL	Zip Code 32082-4016
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407447

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SHIELDS, VIRGINIA, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6740 EPPING FOREST WAY N
APT. 107

City JACKSONVILLE	State FL	Zip Code 32217-
----------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

Transaction ID : SA11A.365409

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4426 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIELDS, VIRGINIA, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 EPPING FOREST WAY N
 APT. 107
 City JACKSONVILLE State FL Zip Code 32217-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379654
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SHIELDS, VIRGINIA, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 EPPING FOREST WAY N
 APT. 107
 City JACKSONVILLE State FL Zip Code 32217-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417071
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. SHIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 76 WOODWORTH LANE
 City SCITUATE State MA Zip Code 02066-4460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.361945
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4427 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIMIZU, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 SEDGEWICK
 City IRVINE State CA Zip Code 92620-2156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELL Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370306
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHIMIZU, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 SEDGEWICK
 City IRVINE State CA Zip Code 92620-2156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELL Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391823
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SHIMIZU, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 SEDGEWICK
 City IRVINE State CA Zip Code 92620-2156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELL Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391825
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4428 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHINKAY, SEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11946 N. ST. RD. 26

City FORT ATKINSON	State WI	Zip Code 53538-9403
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RESTAURANT OWNER/LANLORD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2016

Transaction ID : SA11A.346576

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SHINKAY, SEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11946 N. ST. RD. 26

City FORT ATKINSON	State WI	Zip Code 53538-9403
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RESTAURANT OWNER/LANLORD
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

Transaction ID : SA11A.364144

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SHINKAY, SEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11946 N. ST. RD. 26

City FORT ATKINSON	State WI	Zip Code 53538-9403
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RESTAURANT OWNER/LANLORD
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2016

Transaction ID : SA11A.393775

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4429 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIPLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 NE 94TH
 City SEATTLE State WA Zip Code 98115-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : SA11A.377449
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. SHIPLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 NE 94TH
 City SEATTLE State WA Zip Code 98115-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.387075
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. SHIPLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 NE 94TH
 City SEATTLE State WA Zip Code 98115-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.387077
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4430 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHIPLEY, CHARLES, , ,

Mailing Address 1227 NE 94TH

City SEATTLE State WA Zip Code 98115-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016

Transaction ID : SA11A.399997

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHIPLEY, CHARLES, , ,

Mailing Address 1227 NE 94TH

City SEATTLE State WA Zip Code 98115-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.405836

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHIPLEY, CHARLES, , ,

Mailing Address 1227 NE 94TH

City SEATTLE State WA Zip Code 98115-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11A.411420

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4431 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIPLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 NE 94TH
 City SEATTLE State WA Zip Code 98115-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420010
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SHIPLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 NE 94TH
 City SEATTLE State WA Zip Code 98115-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420012
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351968
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4432 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358205
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.361992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.363810
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4433 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373616
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379039
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4434 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.401571
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407927
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHIPLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MCCAMPBELL ROAD
 City HOLMDEL State NJ Zip Code 07733-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1589.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415713
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4435 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIPPY, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 FERGUSON STREET
 City ST. MARIES State ID Zip Code 83861-2331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358211
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SHIREY, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7019 QUIET CREEK DRIVE
 City BRADENTON State FL Zip Code 34212-4303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370340
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHIRK, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 BROOKGATE WAY NE
 City ATLANTA State GA Zip Code 30319-2877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369991
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4436 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIRK, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1180 BROOKGATE WAY NE

City ATLANTA	State GA	Zip Code 30319-2877
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.389373

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SHIRK, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1180 BROOKGATE WAY NE

City ATLANTA	State GA	Zip Code 30319-2877
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.396894

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SHIRK, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1180 BROOKGATE WAY NE

City ATLANTA	State GA	Zip Code 30319-2877
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403207

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4437 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIRK, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1180 BROOKGATE WAY NE
 City ATLANTA State GA Zip Code 30319-2877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHIRLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1491 MORRISON MOORE PARKWAY W
 City DAHLONEGA State GA Zip Code 30533-1412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415497
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SHIVELY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 992 NOHUNTA CT
 City CINCINNATI State OH Zip Code 45231-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAS ELECTRIC LLC Occupation (for Individual) ELECTRICIAN OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407680
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4438 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIVELY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 992 NOHUNTA CT
 City CINCINNATI State OH Zip Code 45231-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAS ELECTRIC LLC Occupation (for Individual) ELECTRICIAN OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407683
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHIVELY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 992 NOHUNTA CT
 City CINCINNATI State OH Zip Code 45231-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAS ELECTRIC LLC Occupation (for Individual) ELECTRICIAN OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407684
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SHIVELY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 992 NOHUNTA CT
 City CINCINNATI State OH Zip Code 45231-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAS ELECTRIC LLC Occupation (for Individual) ELECTRICIAN OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418314
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4439 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHIVELY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 992 NOHUNTA CT
 City CINCINNATI State OH Zip Code 45231-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAS ELECTRIC LLC Occupation (for Individual) ELECTRICIAN OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418896
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHJEFLO, WALT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 ALAMEDA DE LAS PULGAS #250
 City SAN MATEO State CA Zip Code 94403-1271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407872
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SHJEFLO, WALT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 ALAMEDA DE LAS PULGAS #250
 City SAN MATEO State CA Zip Code 94403-1271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415205
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4440 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHOEMAKER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 404 FOLKERTH AVENUE
 City SIDNEY State OH Zip Code 45365-9002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378288
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. SHOEMAKER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 404 FOLKERTH AVENUE
 City SIDNEY State OH Zip Code 45365-9002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378450
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. SHOENER, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13941 CANTERBURY CIRCLE
 City LEAWOOD State KS Zip Code 66224-9808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408149
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4441 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHONK, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6574 APACHE CIR.
 City CINCINNATI State OH Zip Code 45243-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLUNTEER @ THE CHRIST HOSPITAL Occupation (for Individual) R.N.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408720
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SHOOK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 QUIT WATERS RD
 City BELMONT State NC Zip Code 28012-7801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHEN SHOOK Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.385176
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHOOK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 QUIT WATERS RD
 City BELMONT State NC Zip Code 28012-7801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHEN SHOOK Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391150
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4442 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHOOK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 QUIT WATERS RD
 City BELMONT State NC Zip Code 28012-7801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHEN SHOOK Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409806
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHOOK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 QUIT WATERS RD
 City BELMONT State NC Zip Code 28012-7801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEPHEN SHOOK Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409809
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SHORE, ANDREW, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5904 NORTH 22ND STREET
 City ARLINGTON State VA Zip Code 22205-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOCHUM SHORE & TROSSEIN PC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.402084
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4443 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHORT, DELANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 432 OAKWOOD RD

City KERRVILLE	State TX	Zip Code 78028-8905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403111

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SHORT, DELANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 432 OAKWOOD RD

City KERRVILLE	State TX	Zip Code 78028-8905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403119

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SHORT, DELANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 432 OAKWOOD RD

City KERRVILLE	State TX	Zip Code 78028-8905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403121

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4444 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS &,MILLWORK INC. Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352316
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS &,MILLWORK INC. Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356266
 Amount of Each Receipt this Period
 147.00
 Memo Item
 CONTRIBUTION

C. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS &,MILLWORK INC. Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383016
 Amount of Each Receipt this Period
 147.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	394.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4445 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHORT, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEST LANCASTER RD
 City HAYDEN State ID Zip Code 83835-8601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JERRY SHORT CABINETS &,MILLWORK INC. Occupation (for Individual) CABINETMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411249
 Amount of Each Receipt this Period
 147.00
 Memo Item
 CONTRIBUTION

B. SHRAKE, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 APPLE VALLEY LN SHROCKWORKS
 City HOUSTON State TX Zip Code 77069-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHROCKWORKS Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379940
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SHRAKE, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 APPLE VALLEY LN SHROCKWORKS
 City HOUSTON State TX Zip Code 77069-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHROCKWORKS Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407628
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	647.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4446 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHRAKE, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 APPLE VALLEY LN
 SHROCKWORKS
 City HOUSTON State TX Zip Code 77069-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHROCKWORKS Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407632
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SHRAKE, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 APPLE VALLEY LN
 SHROCKWORKS
 City HOUSTON State TX Zip Code 77069-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHROCKWORKS Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407633
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SHREINER, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1558 HEARTHSIDE DRIVE
 City CHAMBERSBURG State PA Zip Code 17202-4705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347914
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4447 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHULLMAN, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5868 PADDINGTON WAY
 City BOCA RATON State FL Zip Code 33496-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHULLMAN HEALTH MANAGEMENT Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408190
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SHULTS, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2341 PEACHTREE LANE
 City NORTHBROOK State IL Zip Code 60062-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370629
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SHULTS, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2341 PEACHTREE LANE
 City NORTHBROOK State IL Zip Code 60062-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394541
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4448 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHULTS, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2341 PEACHTREE LANE
 City NORTHBROOK State IL Zip Code 60062-3547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SHUMAN, JOSEPHINE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 MOUNTAIN AVENUE
 City PIEDMONT State CA Zip Code 94611-3510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364318
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SHUVALOV, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 738
 City MANOR State TX Zip Code 78653-0738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PUBLISHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355780
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4449 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SHUVALOV, ANDREW, , ,

Mailing Address **BOX 738**

City MANOR	State TX	Zip Code 78653-0738
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PUBLISHER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11A.380788

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SHUVALOV, ANDREW, , ,

Mailing Address **BOX 738**

City MANOR	State TX	Zip Code 78653-0738
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PUBLISHER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : SA11A.407955

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SHUVALOV, ANDREW, , ,

Mailing Address **BOX 738**

City MANOR	State TX	Zip Code 78653-0738
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PUBLISHER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : SA11A.410035

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4450 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SICARD, RYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 314 CEDAR STREET #237

City SOMERSET	State WI	Zip Code 54025-9677
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.353975

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SICILIANO, CARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3275 N BENZING RD

City ORCHARD PARK	State NY	Zip Code 14127-1519
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GIBSON SOTHEBY INTERNATIOAL	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.371563

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. SIDDOWNAY, LYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1408 CREST WAY

City YORK	State PA	Zip Code 17403-9102
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WELLSPAN HEALTH	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384339

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4451 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIDDOWAY, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 CREST WAY
 City YORK State PA Zip Code 17403-9102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLSPAN HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384342
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SIDDOWAY, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 CREST WAY
 City YORK State PA Zip Code 17403-9102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLSPAN HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412302
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SIE, JOHN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 SANDY LAKE RD
 City ENGLEWOOD State CO Zip Code 80113-4140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANNA & JOHN SIE FOUNDATION Occupation (for Individual) TRUSTEE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.361553
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4452 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIEBER, GRAFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N NEW RIVER DR E, 706
 City FORT LAUDERDALE State FL Zip Code 33301-3179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399423
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SIEBERT, JEAN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2724 SANDFIDDLER ROAD
 City VIRGINIA BEACH State VA Zip Code 23456-4511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIEBERT REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415474
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SIEGEL, HERBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 E 59TH STREET FLOOR 22B
 City NEW YORK State NY Zip Code 10022-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391342
 Amount of Each Receipt this Period 150000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4453 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIEGEL, JEANNE, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 FIFTH AVE STE 605
 City NEW YORK State NY Zip Code 10022-5500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391334
 Amount of Each Receipt this Period
 150000.00
 Memo Item
 CONTRIBUTION

B. SIEGEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1063 SURREY WOODS DRIVE
 City CANONSBURG State PA Zip Code 15317-6306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348525
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SIEGEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1063 SURREY WOODS DRIVE
 City CANONSBURG State PA Zip Code 15317-6306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348536
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4454 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIEGEL, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1063 SURREY WOODS DRIVE

City CANONSBURG	State PA	Zip Code 15317-6306
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406821

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SIEGEL, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1063 SURREY WOODS DRIVE

City CANONSBURG	State PA	Zip Code 15317-6306
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415740

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SIENKO, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2205 E MOUNTAIN VISTA DR

City COEUR D ALENE	State ID	Zip Code 83815-8583
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.398472

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4455 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIENKIEWICZ, STANLEY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5540 30TH ST NW

City WASHINGTON	State DC	Zip Code 20015-1250
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US AGENCY FOR INT'L DEVELOPMENT	Occupation (for Individual) FEDERAL GOVERNMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.366491

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. SIENKIEWICZ, STANLEY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5540 30TH ST NW

City WASHINGTON	State DC	Zip Code 20015-1250
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US AGENCY FOR INT'L DEVELOPMENT	Occupation (for Individual) FEDERAL GOVERNMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388776

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SIERING, THOMAS, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4501 GULF SHORE BLVD N APT 803

City NAPLES	State FL	Zip Code 34103-2763
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDEN PRAIRIE BASEBALL ASSICOIATION	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.383564

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4456 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIGETY, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LEXINGTON AVE
 KENBAR
 City NEW YORK State NY Zip Code 10029-7349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENBAR MANAGEMENT Occupation (for Individual) RESL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349452
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SIGMAN, WALTER, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8637 PALMETTO ROAD
 City EDISTO ISLAND State SC Zip Code 29438-6922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347812
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. SIGMAN, WALTER, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8637 PALMETTO ROAD
 City EDISTO ISLAND State SC Zip Code 29438-6922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.357757
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	560.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4457 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIGMAN, WALTER, A., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8637 PALMETTO ROAD

City EDISTO ISLAND	State SC	Zip Code 29438-6922
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.370148

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SIGMAN, WALTER, A., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8637 PALMETTO ROAD

City EDISTO ISLAND	State SC	Zip Code 29438-6922
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2016

Transaction ID : SA11A.391242

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SIGMAN, WALTER, A., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8637 PALMETTO ROAD

City EDISTO ISLAND	State SC	Zip Code 29438-6922
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11A.408088

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4458 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIGMAN, WALTER, A., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8637 PALMETTO ROAD

City EDISTO ISLAND	State SC	Zip Code 29438-6922
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414915

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SIGNORELLI, JEANINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 194

City SHIRLEY	State NY	Zip Code 11967-0194
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358667

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

C. SIGNORELLI, JEANINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 194

City SHIRLEY	State NY	Zip Code 11967-0194
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383450

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4459 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SILKEY, AL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 727**
 City **NORMAN** State **OK** Zip Code **73070-0727**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SILKEY LAW OFFICE PC** Occupation (for Individual) **ATTORNEY**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381367
 Amount of Each Receipt this Period **500.00**
 Memo Item
CONTRIBUTION

B. SILKWOOD, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **4448 KANDYWOOD DRIVE**
 City **PORT ARTHUR** State **TX** Zip Code **77642-6443**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.367121
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

C. SILL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **2528 HONOLULU AVEUE**
 City **MONTROSE** State **CA** Zip Code **91020-1806**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364417
 Amount of Each Receipt this Period **225.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	975.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4460 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SILL, ROD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14556 N COUNTY ROAD 24

City WABASHA	State MN	Zip Code 55981-7530
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.356554

Amount of Each Receipt this Period
201.00

Memo Item CONTRIBUTION

B. SILLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1085 PARK AVENUE APT 10B

City NEW YORK	State NY	Zip Code 10128-1188
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.377616

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. SILVERMAN, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1445 16TH STREET
APT. 1102

City MIAMI BEACH	State FL	Zip Code 33139-2288
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
MM / DD / YYYY
07 / 08 / 2016

Transaction ID : SA11A.346707

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50701.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4461 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SILVERSTEIN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 W 58TH ST
APT. 2A

City NEW YORK State NY Zip Code 10019-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLWOOD Occupation (for Individual) FASHION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2016

Transaction ID : SA11A.359838

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SILVERSTEIN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 W 58TH ST
APT. 2A

City NEW YORK State NY Zip Code 10019-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLWOOD Occupation (for Individual) FASHION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.405352

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. SILVERSTEIN, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 W 58TH ST
APT. 2A

City NEW YORK State NY Zip Code 10019-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLWOOD Occupation (for Individual) FASHION

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.405354

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4462 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SIM, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101W 67TH STREET
46H

City NEW YORK State NY Zip Code 10023-5906

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIGHT INC Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016

Transaction ID : SA11A.360225

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. SIMKINS, LEROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 MACARTAN ST.

City AUGUSTA State GA Zip Code 30901-1204

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMKINS LAND CO. Occupation (for Individual) BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386833

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SIMKINS, LEROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 MACARTAN ST.

City AUGUSTA State GA Zip Code 30901-1204

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMKINS LAND CO. Occupation (for Individual) BROKER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407685

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4463 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMKINS, LEROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 MACARTAN ST.

City AUGUSTA	State GA	Zip Code 30901-1204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMKINS LAND CO.	Occupation (for Individual) BROKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419410

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SIMMELINK, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98413 LILLIANN DR

City KENNEWICK	State WA	Zip Code 99338-7476
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
547.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378938

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. SIMMELINK, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98413 LILLIANN DR

City KENNEWICK	State WA	Zip Code 99338-7476
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
547.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383872

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4464 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMELINK, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98413 LILLIANN DR

City KENNEWICK	State WA	Zip Code 99338-7476
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
547.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412651

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SIMMONS, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 CHARLES ROAD

City BERNARDSVILLE	State NJ	Zip Code 07924-1922
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GNS,LLC	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.354042

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SIMMONS, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 CHARLES ROAD

City BERNARDSVILLE	State NJ	Zip Code 07924-1922
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GNS,LLC	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
583.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422359

Amount of Each Receipt this Period
333.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	633.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4465 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 TRIPLE R DRIVE
 City LA VERNIA State TX Zip Code 78121-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAA Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.360259
 Amount of Each Receipt this Period 2700.00
 Memo Item
 CONTRIBUTION

B. SIMMONS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 HILLCREST DRIVE
 City VENTURA State CA Zip Code 93001-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VCOE Occupation (for Individual) HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 17 / 2016**
Transaction ID : SA11A.349000
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. SIMMONS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 HILLCREST DRIVE
 City VENTURA State CA Zip Code 93001-2330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VCOE Occupation (for Individual) HR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362419
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4466 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, HARDWICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 HAMMETTS COVE ROAD
 City MARION State MA Zip Code 02738-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414724
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SIMMONS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 SUNSET COVE LANE
 City MOORESVILLE State NC Zip Code 28117-0500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412415
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SIMMONS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23230 BONAIR ST
 City DEARBORN HEIGHTS State MI Zip Code 48127-2308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORD MOTOR CO Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362252
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	825.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4467 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409714

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409716

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SIMMONS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23230 BONAIR ST

City DEARBORN HEIGHTS	State MI	Zip Code 48127-2308
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412958

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4468 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 189TH AVE NE
 City SAMMAMISH State WA Zip Code 98074-6125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415495
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SIMMONS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 S LIVE OAK ST
 City GENEVA State AL Zip Code 36340-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364726
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SIMMONS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 S LIVE OAK ST
 City GENEVA State AL Zip Code 36340-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366850
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4469 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMONS, LAURENCE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS ST STE 6600
 SUITE 6600
 City HOUSTON State TX Zip Code 77002-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCF PARTNERS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.348193
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. SIMMONS, LAURENCE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 TRAVIS ST STE 6600
 SUITE 6600
 City HOUSTON State TX Zip Code 77002-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCF PARTNERS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364203
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. SIMMS, NAMCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 MABRY RD.
 City ATLANTA State GA Zip Code 30319-2823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE VARSITY INC. Occupation (for Individual) RESTAURANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412308
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4470 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMS, PAUL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 EDGEWOOD COURT
 City WEST LAFAYETTE State IN Zip Code 47906-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348382
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SIMMS, PAUL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 EDGEWOOD COURT
 City WEST LAFAYETTE State IN Zip Code 47906-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348388
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SIMMS, PAUL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 EDGEWOOD COURT
 City WEST LAFAYETTE State IN Zip Code 47906-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376081
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4471 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMMS, PAUL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 EDGEWOOD COURT
 City WEST LAFAYETTE State IN Zip Code 47906-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384219
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SIMMS, PAUL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 EDGEWOOD COURT
 City WEST LAFAYETTE State IN Zip Code 47906-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384247
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SIMON, ALLEN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1383 N CRISS ST
 City CHANDLER State AZ Zip Code 85226-1307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414352
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4472 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMONS, DOYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 758**

City **SPICEWOOD** State **TX** Zip Code **78669-0758**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **08 / 17 / 2016**
Transaction ID : **SA11A.367927**

Amount of Each Receipt this Period **5000.00**

Memo Item CONTRIBUTION

B. SIMON, JOAN, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **3309 WORTHINGTON DR**

City **MODESTO** State **CA** Zip Code **95350-1648**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **07 / 21 / 2016**
Transaction ID : **SA11A.347219**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

C. SIMON, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **602 SHORELINE DR**

City **DEWITT** State **MI** Zip Code **48820-8707**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : **SA11A.386247**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **5500.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4473 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMON, SHELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 BEACON STREET
 UNIT 4
 City BOSTON State MA Zip Code 02116-1332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAGE CAPITAL MANAGEMENT, LP Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388774
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SIMONSEN, SVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 FLOOD CIRCLE
 City ATHERTON State CA Zip Code 94027-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347433
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SIMONSEN, SVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 FLOOD CIRCLE
 City ATHERTON State CA Zip Code 94027-2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348809
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 4474 OF 5722

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SIMPSON, CHARLES, H., MR.,

Mailing Address **3104 MERION DRIVE**

City **MIRAMAR BEACH** State **FL** Zip Code **32550-7855**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
09 / 19 / 2016

Transaction ID : SA11A.397343

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SIMPSON, JOHN, , ,

Mailing Address **511 HILLTOP TER E.**

City **ALEXANDRIA** State **VA** Zip Code **22301-2717**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.373902

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SIMPSON, ROBERT, , ,

Mailing Address **75 E. FOUNTAIN AVE.**

City **GLENDALE** State **OH** Zip Code **45246-4452**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **AMERICAN RISK SERVICES** Occupation (for Individual) **INSURANCE EXECUTIVE**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
08 / 28 / 2016

Transaction ID : SA11A.385163

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1500.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4475 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMPSON, TED, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 BANBURY ROAD
 City COLUMBIA State SC Zip Code 29210-4155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390497
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SIMS, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 BUFFLEHEAD DRIVE
 City KIAWAH ISLAND State SC Zip Code 29455-5791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348674
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SIMS, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 BUFFLEHEAD DRIVE
 City KIAWAH ISLAND State SC Zip Code 29455-5791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401300
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4476 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2348 EDINGTON ROAD
 City COLUMBUS State OH Zip Code 43221-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378423
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SINATRA, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1526 MAIN ST APT 5
 City BUFFALO State NY Zip Code 14209-1742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SINATRA & COMPANY Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383549
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. SINCLAIR, KATHRYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 KEY WEST DRIVE
 City CHARLOTTESVILLE State VA Zip Code 22911-8423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377771
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4477 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SINITO, FRANK, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8111 ROCKSIDE RD STE 200

City VALLEY VIEW	State OH	Zip Code 44125-6135
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MILLENIA CO'S	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391360

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. SINNOTT, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10100 N ALDER SPRINGS DR

City ORO VALLEY	State AZ	Zip Code 85737-9494
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.348314

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SINNOTT, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10100 N ALDER SPRINGS DR

City ORO VALLEY	State AZ	Zip Code 85737-9494
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.349779

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4478 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SINNOTT, J, , ,			Date of Receipt MM / DD / YYYY 07 / 20 / 2016
Mailing Address 10100 N ALDER SPRINGS DR			Transaction ID : SA11A.349851
City ORO VALLEY	State AZ	Zip Code 85737-9494	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SINNOTT, J, , ,			Date of Receipt MM / DD / YYYY 07 / 21 / 2016
Mailing Address 10100 N ALDER SPRINGS DR			Transaction ID : SA11A.352369
City ORO VALLEY	State AZ	Zip Code 85737-9494	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SINNOTT, J, , ,			Date of Receipt MM / DD / YYYY 08 / 04 / 2016
Mailing Address 10100 N ALDER SPRINGS DR			Transaction ID : SA11A.363132
City ORO VALLEY	State AZ	Zip Code 85737-9494	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 3600.00		

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4479 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SINNOTT, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR
 City ORO VALLEY State AZ Zip Code 85737-9494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3600.00

Date of Receipt
 08 / 13 / 2016
Transaction ID : SA11A.366841
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SINNOTT, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR
 City ORO VALLEY State AZ Zip Code 85737-9494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3600.00

Date of Receipt
 08 / 21 / 2016
Transaction ID : SA11A.375932
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SINNOTT, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 N ALDER SPRINGS DR
 City ORO VALLEY State AZ Zip Code 85737-9494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 3600.00

Date of Receipt
 09 / 21 / 2016
Transaction ID : SA11A.401519
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4480 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SISSEL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 ADAMS STREET
 City DENVER State CO Zip Code 80206-4413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378856
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SITTER, MARJORIE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 VISTA CATEDRAL
 City SANTA FE State NM Zip Code 87501-6429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2016
Transaction ID : SA11A.346833
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. SITTER, MARJORIE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 VISTA CATEDRAL
 City SANTA FE State NM Zip Code 87501-6429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370283
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4481 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIVEWRIGHT, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 UPPER LADUE RD
 City ST LOUIS State MO Zip Code 63124-1630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388209
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SKAGGS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3939 BEE CAVE RD BLDG C-100
 City AUSTIN State TX Zip Code 78746-6431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352323
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SKAGGS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3939 BEE CAVE RD BLDG C-100
 City AUSTIN State TX Zip Code 78746-6431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375891
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4482 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKAGGS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3939 BEE CAVE RD
 BLDG C-100
 City AUSTIN State TX Zip Code 78746-6431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401483
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350340
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357669
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4483 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKAGGS, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 2905
 City AMARILLO State TX Zip Code 79105-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398225
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SKARSON, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8827 BLACKBIRD ROAD
 City DELMAR State DE Zip Code 19940-3331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENINSULA REGIONAL MEDICAL CENTER Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418780
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SKARSON, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8827 BLACKBIRD ROAD
 City DELMAR State DE Zip Code 19940-3331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENINSULA REGIONAL MEDICAL CENTER Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418856
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4484 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKARSON, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8827 BLACKBIRD ROAD
 City DELMAR State DE Zip Code 19940-3331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENINSULA REGIONAL MEDICAL CENTER Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SKARSON, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8827 BLACKBIRD ROAD
 City DELMAR State DE Zip Code 19940-3331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENINSULA REGIONAL MEDICAL CENTER Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418910
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SKARZYNSKI, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SHERWOOD AVE
 City GREENWICH State CT Zip Code 06831-3248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAM'S EUROPEAN CONTRACTING INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404791
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4485 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKEWES, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14409 ISLEVIEW DR

City WINTER GARDEN	State FL	Zip Code 34787-6203
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374399

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SKEWES, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14409 ISLEVIEW DR

City WINTER GARDEN	State FL	Zip Code 34787-6203
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384121

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SKEWES, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14409 ISLEVIEW DR

City WINTER GARDEN	State FL	Zip Code 34787-6203
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384122

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4486 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SKEWES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14409 ISLEVIEW DR
 City WINTER GARDEN State FL Zip Code 34787-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394130
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SKEWES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14409 ISLEVIEW DR
 City WINTER GARDEN State FL Zip Code 34787-6203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394131
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SKOWRONSKI, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8642 SO 116 ST
 City FRANKLIN State WI Zip Code 53132-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF WI Occupation (for Individual) STATE REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356364
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4487 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SLABY, EDWARD, , ,		Date of Receipt MM / DD / YYYY 08 / 11 / 2016 Transaction ID : SA11A.364998
Mailing Address 3956 A N 3000 W RD		Amount of Each Receipt this Period 100.00
City BOURBONNAIS	State IL	Zip Code 60914-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SLABY, EDWARD, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016 Transaction ID : SA11A.390152
Mailing Address 3956 A N 3000 W RD		Amount of Each Receipt this Period 30.00
City BOURBONNAIS	State IL	Zip Code 60914-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SLABY, EDWARD, , ,		Date of Receipt MM / DD / YYYY 09 / 06 / 2016 Transaction ID : SA11A.390158
Mailing Address 3956 A N 3000 W RD		Amount of Each Receipt this Period 100.00
City BOURBONNAIS	State IL	Zip Code 60914-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4488 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLACK, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6822 LAKEHURST AVE
City DALLAS State TX Zip Code 75230-5208
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388610
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SLADE2, SIDNEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 21 JET LANE
City CARMEL VALLEY State CA Zip Code 93924-9528
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374279
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SLADE2, SIDNEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 21 JET LANE
City CARMEL VALLEY State CA Zip Code 93924-9528
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388438
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4489 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLADE2, SIDNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 JET LANE
 City CARMEL VALLEY State CA Zip Code 93924-9528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419289
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SLAGLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6947 S. COLUMBIA AVE
 City TULSA State OK Zip Code 74136-4329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360190
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SLAGLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6947 S. COLUMBIA AVE
 City TULSA State OK Zip Code 74136-4329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420300
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4490 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLATER, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3105 PACIFIC HEIGHTS ROAD
 City HONOLULU State HI Zip Code 96813-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400943
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SLATER, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3105 PACIFIC HEIGHTS ROAD
 City HONOLULU State HI Zip Code 96813-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412660
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SLATER, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3105 PACIFIC HEIGHTS ROAD
 City HONOLULU State HI Zip Code 96813-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412667
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4491 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLAVENSKY, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3303 POPE AVE
 City SACRAMENTO State CA Zip Code 95821-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418386
 Amount of Each Receipt this Period
 600.00
 Memo Item
 CONTRIBUTION

B. SLEY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8734 CYPRESS CLUB DRIVE
 City RALEIGH State NC Zip Code 27615-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392117
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SLEY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8734 CYPRESS CLUB DRIVE
 City RALEIGH State NC Zip Code 27615-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.393622
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4492 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLEY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8734 CYPRESS CLUB DRIVE
 City RALEIGH State NC Zip Code 27615-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407658
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. SLEY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8734 CYPRESS CLUB DRIVE
 City RALEIGH State NC Zip Code 27615-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412811
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SLOAN, O., TEMPLE, , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 FALLS OF NEUSE RD STE 150
 City RALEIGH State NC Zip Code 27609-5490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL PARTS INTERNATIONAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.361544
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4493 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353827
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383113
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.392214
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4494 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408277
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413938
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413939
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4495 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420128
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SLOTH, SELMA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 10TH AVE. S
 460
 City MINNEAPOLIS State MN Zip Code 55404-1309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420131
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SLUSHER, HOWARD, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE BOWERMAN DR
 City BEAVERTON State OR Zip Code 97005-0979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOWARD S SLUSHER, INC. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5002.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354423
 Amount of Each Receipt this Period
 5002.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5052.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4496 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SLUSHER, JOHN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BOWERMAN PL
 City BEVERTON State OR Zip Code 97005-0979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.354434
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. SMALL, ALBERT, H., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7116 GLENBROOK ROAD
 City BETHESDA State MD Zip Code 20814-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN ENGINEERING CORP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375126
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SMALL, GEORGE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 CIRCLE WAY
 City SHARON State MA Zip Code 02067-2221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391042
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4497 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMALL, GEORGE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5 CIRCLE WAY
City SHARON State MA Zip Code 02067-2221
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.391043
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMELLEY, KAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10823 WHITE OAK TRACE DR
City CYPRESS State TX Zip Code 77429-3945
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) AMERICAN ALLOY STEEL Occupation (for Individual) ADMINISTRATIVE ASSISTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348714
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMELLEY, KAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10823 WHITE OAK TRACE DR
City CYPRESS State TX Zip Code 77429-3945
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) AMERICAN ALLOY STEEL Occupation (for Individual) ADMINISTRATIVE ASSISTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 525.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348849
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4498 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SMELLEY, KAY, , ,		Date of Receipt MM / DD / YYYY 07 / 25 / 2016 Transaction ID : SA11A.354520
Mailing Address 10823 WHITE OAK TRACE DR		Amount of Each Receipt this Period 50.00
City CYPRESS	State TX	Zip Code 77429-3945
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AMERICAN ALLOY STEEL	Occupation (for Individual) ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SMELLEY, KAY, , ,		Date of Receipt MM / DD / YYYY 08 / 25 / 2016 Transaction ID : SA11A.379817
Mailing Address 10823 WHITE OAK TRACE DR		Amount of Each Receipt this Period 100.00
City CYPRESS	State TX	Zip Code 77429-3945
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AMERICAN ALLOY STEEL	Occupation (for Individual) ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SMELLEY, KAY, , ,		Date of Receipt MM / DD / YYYY 08 / 25 / 2016 Transaction ID : SA11A.380031
Mailing Address 10823 WHITE OAK TRACE DR		Amount of Each Receipt this Period 50.00
City CYPRESS	State TX	Zip Code 77429-3945
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AMERICAN ALLOY STEEL	Occupation (for Individual) ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4499 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SMELLEY, KAY, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.403857
Mailing Address 10823 WHITE OAK TRACE DR		Amount of Each Receipt this Period 100.00
City CYPRESS	State TX	Zip Code 77429-3945
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AMERICAN ALLOY STEEL	Occupation (for Individual) ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SMELLEY, KAY, , ,		Date of Receipt MM / DD / YYYY 09 / 25 / 2016 Transaction ID : SA11A.408701
Mailing Address 10823 WHITE OAK TRACE DR		Amount of Each Receipt this Period 50.00
City CYPRESS	State TX	Zip Code 77429-3945
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) AMERICAN ALLOY STEEL	Occupation (for Individual) ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SMELTZER, KAREN, , ,		Date of Receipt MM / DD / YYYY 07 / 31 / 2016 Transaction ID : SA11A.359219
Mailing Address 1215 ROOT LANE		Amount of Each Receipt this Period 25.00
City PASO ROBLES	State CA	Zip Code 93446-2081
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4500 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMELTZER, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 ROOT LANE
 City PASO ROBLES State CA Zip Code 93446-2081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359220
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMELTZER, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 ROOT LANE
 City PASO ROBLES State CA Zip Code 93446-2081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.387241
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SMELTZER, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 ROOT LANE
 City PASO ROBLES State CA Zip Code 93446-2081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394302
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4501 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SMELTZER, KAREN, , ,

Mailing Address 1215 ROOT LANE

City PASO ROBLES	State CA	Zip Code 93446-2081
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.408047

Amount of Each Receipt this Period
40.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SMELTZER, KAREN, , ,

Mailing Address 1215 ROOT LANE

City PASO ROBLES	State CA	Zip Code 93446-2081
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412160

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SMITH, ARCHIE, , ,

Mailing Address 713 VISTA VERDE WAY

City BAKERSFIELD	State CA	Zip Code 93309-2347
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384322

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1065.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4502 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5353 SCOTTS VALLEY DRIVE
 SUITE D
 City SCOTTS VALLEY State CA Zip Code 95066-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BTSIV, LLC INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2016
Transaction ID : SA11A.345851
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. SMITH, BILLY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 LINCOLN ROAD
 City ALLEGAN State MI Zip Code 49010-9075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358700
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. SMITH, BILLY, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 LINCOLN ROAD
 City ALLEGAN State MI Zip Code 49010-9075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389830
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4503 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, BOYD, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3260 ASH STREET
 City PALO ALTO State CA Zip Code 94306-2239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WSJ PROPERTIES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.346480
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. SMITH, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9665 LAKE WASHINGTON BLVD
 City BELLEVUE State WA Zip Code 98004-5406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICROSOFT Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367975
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

C. SMITH, CAMERON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GREAT ELM DRIVE UNIT 1
 City SHARON State CT Zip Code 06069-2273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420203
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 66000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4504 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, CROSBY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 451 VILLAGE LANE
 City VERO BEACH State FL Zip Code 32963-3435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358640
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SMITH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6539 MOORINGS PT CIR 201
 City LAKEWOOD RANCH State FL Zip Code 34202-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **07 / 25 / 2016**
Transaction ID : SA11A.353026
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SMITH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 GRAYSON STREET
 City COLLIERVILLE State TN Zip Code 38017-1398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) NUCLEAR ENGINEERING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.354450
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4505 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6539 MOORINGS PT CIR
 201
 City LAKEWOOD RANCH State FL Zip Code 34202-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : SA11A.365659
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6539 MOORINGS PT CIR
 201
 City LAKEWOOD RANCH State FL Zip Code 34202-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384034
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SMITH, DAVID, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 181 STONEY CREEK COURT
 City GARDNERVILLE State NV Zip Code 89460-6424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390828
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4506 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2251 PIMMIT DR
1201

City FALLS CHURCH State VA Zip Code 22043-2811

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DENTONS Occupation (for Individual) CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt **07 / 27 / 2016**

Transaction ID : SA11A.356334

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. SMITH, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2251 PIMMIT DR
1201

City FALLS CHURCH State VA Zip Code 22043-2811

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DENTONS Occupation (for Individual) CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt **08 / 27 / 2016**

Transaction ID : SA11A.383100

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. SMITH, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 185 REDWOOD LANE

City WEEMS State VA Zip Code 22576-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 31 / 2016**

Transaction ID : SA11A.359704

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4507 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349249
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360148
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363866
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4508 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372588
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379884
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.401027
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4509 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403408
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403435
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403447
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4510 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414107
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KIMBERLY COURT
 City SEVERNA PARK State MD Zip Code 21146-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414110
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9601 VERLAINE COURT
 City LAS VEGAS State NV Zip Code 89145-8694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH CHRISTIAN ENT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364284
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4511 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITHWICK, ED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20110 SCOTT
City CHAPEL HILL State NC Zip Code 27517-8558
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.405654
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SMITH, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6109 STONEHAVEN DRIVE
City NASHVILLE State TN Zip Code 37215-5613
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356317
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6109 STONEHAVEN DRIVE
City NASHVILLE State TN Zip Code 37215-5613
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 700.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362292
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4512 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6109 STONEHAVEN DRIVE

City NASHVILLE	State TN	Zip Code 37215-5613
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2016

Transaction ID : SA11A.383047

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SMITH, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6109 STONEHAVEN DRIVE

City NASHVILLE	State TN	Zip Code 37215-5613
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2016

Transaction ID : SA11A.389163

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SMITH, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6109 STONEHAVEN DRIVE

City NASHVILLE	State TN	Zip Code 37215-5613
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.411261

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4513 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 CR 2330
 City PITTSBURG State TX Zip Code 75686-7875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE APPRAISER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350098
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 CR 2330
 City PITTSBURG State TX Zip Code 75686-7875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE APPRAISER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353813
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SMITH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 CR 2330
 City PITTSBURG State TX Zip Code 75686-7875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE APPRAISER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364782
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4514 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, GARY, , ,

Mailing Address **373 SCHMUCK RD.**

City SEQUIM	State WA	Zip Code 98382-8982
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11A.372481

Amount of Each Receipt this Period

100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, GARY, , ,

Mailing Address **1755 CR 2330**

City PITTSBURG	State TX	Zip Code 75686-7875
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE APPRAISER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11A.404818

Amount of Each Receipt this Period

50.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, GARY, , ,

Mailing Address **1755 CR 2330**

City PITTSBURG	State TX	Zip Code 75686-7875
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RE APPRAISER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : SA11A.404834

Amount of Each Receipt this Period

100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4515 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 451 PARK STREET
 City LA CRESCENT State MN Zip Code 55947-1166
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364928
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SMITH, GEOFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2662 CORTINA LANE
 City VAIL State CO Zip Code 81657-4228
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395859
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SMITH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 451 PARK STREET
 City LA CRESCENT State MN Zip Code 55947-1166
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415168
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4516 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350764
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.360009
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.360014
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4517 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366800
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374576
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381788
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 75.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4518 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391205
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.392223
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400030
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4519 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413475
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SMITH, HARRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15230 SW BULL MT RD
 City PORTLAND State OR Zip Code 97224-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.348167
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SMITH, HARRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15230 SW BULL MT RD
 City PORTLAND State OR Zip Code 97224-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348632
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4520 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, HARRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15230 SW BULL MT RD
 City PORTLAND State OR Zip Code 97224-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350951
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, HARRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15230 SW BULL MT RD
 City PORTLAND State OR Zip Code 97224-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359536
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SMITH, HARRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15230 SW BULL MT RD
 City PORTLAND State OR Zip Code 97224-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362239
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4521 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, HARRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15230 SW BULL MT RD

City PORTLAND	State OR	Zip Code 97224-1225
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390377

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SMITH, HARRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15230 SW BULL MT RD

City PORTLAND	State OR	Zip Code 97224-1225
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408203

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. SMITH, HARRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15230 SW BULL MT RD

City PORTLAND	State OR	Zip Code 97224-1225
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412271

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4522 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 HORSESHOE ROAD
 City MILL NECK State NY Zip Code 11765-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373566
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SMITH, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 E. FERNWOOD AVE
 City ORANGE State CA Zip Code 92869-5320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359510
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SMITH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6822 ACADEMY PKWY W NORTH EAST
 City ALBUQUERQUE State NM Zip Code 87109-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JSMITH & ASSOCIATES INC. Occupation (for Individual) SALES ENGINEER/PRES.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384456
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4523 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SMITH, JAMES, , ,

Mailing Address **6822 ACADEMY PKWY W NORTH EAST**

City ALBUQUERQUE	State NM	Zip Code 87109-4406
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JSMITH & ASSOCIATES INC.	Occupation (for Individual) SALES ENGINEER/PRES.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 13 / 2016

Transaction ID : SA11A.394359

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SMITH, JARE, , ,

Mailing Address **4316 SCALES ST**

City AUSTIN	State TX	Zip Code 78723-5396
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 22 / 2016

Transaction ID : SA11A.353268

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SMITH, JARE, , ,

Mailing Address **4316 SCALES ST**

City AUSTIN	State TX	Zip Code 78723-5396
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.423003

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4524 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SMITH, JARE, , ,

Mailing Address **4316 SCALES ST**

City **AUSTIN** State **TX** Zip Code **78723-5396**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.423007

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SMITH, JEFFREY, E., ,

Mailing Address **PO BOX 342**

City **COLUMBIA** State **MO** Zip Code **65205-0342**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **JES HOLDINGS LLC** Occupation (for Individual) **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
07 / 31 / 2016

Transaction ID : SA11A.358862

Amount of Each Receipt this Period
10000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SMITH, JERRY, , ,

Mailing Address **7 SOUTHRIDGE DR**
4

City **CANYON** State **TX** Zip Code **79015-2144**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ASSOCIATED SUPPLY CO. INC.** Occupation (for Individual) **SALES**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.374132

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **10200.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4525 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 SOUTHRIDGE DR
4

City CANYON State TX Zip Code 79015-2144

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASSOCIATED SUPPLY CO. INC. Occupation (for Individual) SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.387399

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SMITH, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 SOUTHRIDGE DR
4

City CANYON State TX Zip Code 79015-2144

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASSOCIATED SUPPLY CO. INC. Occupation (for Individual) SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.402275

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SMITH, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7330 N. HIGHWAY 1 #105
#105

City COCOA State UT Zip Code 32927-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.365885

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4526 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7330 N. HIGHWAY 1 #105 #105
 City COCOA State UT Zip Code 32927-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372097
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7330 N. HIGHWAY 1 #105 #105
 City COCOA State UT Zip Code 32927-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2016
Transaction ID : SA11A.393703
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SMITH, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7330 N. HIGHWAY 1 #105 #105
 City COCOA State UT Zip Code 32927-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403388
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4527 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7330 N. HIGHWAY 1 #105
#105

City COCOA State UT Zip Code 32927-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.415735

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SMITH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 WISTAR ROAD

City VILLANOVA State PA Zip Code 19085-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.373603

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SMITH, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2345 LINWOOD AVENUE
4D

City FORT LEE State NJ Zip Code 07024-3865

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.388218

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4528 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2345 LINWOOD AVENUE
 4D
 City FORT LEE State NJ Zip Code 07024-3865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419352
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SMITH, KEVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4416 COVECREST DR.
 City SALT LAKE CITY State UT Zip Code 84124-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368053
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SMITH, L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1309 NO.LYNNBROOK DR.
 City ARLINGTON State VA Zip Code 22201-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407566
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4529 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MACKENZIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 ELM STREET
 City NORTH EASTON State MA Zip Code 02356-1437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365948
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SMITH, MAIDA, P., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7405 CRESTRIDGE ROAD
 City MEMPHIS State TN Zip Code 38119-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373832
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SMITH, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 11137
 City PORTLAND State ME Zip Code 04104-7137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358719
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4530 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6134 WILLERS WAY
 City HOUSTON State TX Zip Code 77057-2806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOURCE ROCK RESOURCES Occupation (for Individual) OIL AND GAS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369977
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377416
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4531 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409489
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5265 WAYSIDE DR
 City WIMBERLEY State TX Zip Code 78676-6420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 819.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413326
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, MURRAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 GARDEN PLACE
 City BIRMINGHAM State AL Zip Code 35223-1162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386317
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4532 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, MURRAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 GARDEN PLACE
 City BIRMINGHAM State AL Zip Code 35223-1162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403131
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. SMITH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 S PETERBORO STREET
 City CANASTOTA State NY Zip Code 13032-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361347
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. SMITH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 S PETERBORO STREET
 City CANASTOTA State NY Zip Code 13032-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.367278
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4533 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, RICHARD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 BROOK HILLS CIRCLE
 City WHITE PLAINS State NY Zip Code 10605-5004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LSTA Occupation (for Individual) EDUCATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378331
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SMITH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 664 WINDINGS LANE
 City CINCINNATI State OH Zip Code 45220-1083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384145
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SMITH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 271 STEEPLEBROOK
 City SPRING BRANCH State TX Zip Code 78070-6044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390063
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4534 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, ROBERT, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8800 E 82ND STREET

City INDIANAPOLIS	State IN	Zip Code 46256-1802
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381549

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. SMITH, ROBERT, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8800 E 82ND STREET

City INDIANAPOLIS	State IN	Zip Code 46256-1802
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407003

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

C. SMITH, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9624 N. LAMPLIGHTER LANE

City MEQUON	State WI	Zip Code 53092-5321
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A. O. SMITH CORPORATION	Occupation (for Individual) DIRECTOR COMMUNITY AFFAIRS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11A.357973

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4535 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 68
 City ORINDA State CA Zip Code 94563-0068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENEFITS STORE Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363816
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SMITH, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9624 N. LAMPLIGHTER LANE
 City MEQUON State WI Zip Code 53092-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A. O. SMITH CORPORATION Occupation (for Individual) DIRECTOR COMMUNITY AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368783
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD.
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL M SMITH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352362
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1280.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4536 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD.
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL M SMITH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.377487
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

B. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD.
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL M SMITH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386326
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD.
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL M SMITH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401521
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4537 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD.
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL M SMITH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415814
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD.
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL M SMITH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415836
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7821 NIGHT HAWK RD.
 City CHATTANOOGA State TN Zip Code 37421-7304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMUEL M SMITH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415837
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4538 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14110 CAMINITO VISTANA
 City SAN DIEGO State CA Zip Code 92130-3721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELOITTE Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369238
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12014 PEBBLE HILL
 City HOUSTON State TX Zip Code 77024-6208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402749
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SMITH, SCOTT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9813 N MEADOW LANE
 City HIGHLAND State UT Zip Code 84003-9188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER FAMILY MED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.356523
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4539 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11535 S ELK LAKE ROAD
 City WILLIAMSBURG State MI Zip Code 49690-8519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BOARDING KENNEL OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353455
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, SHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11535 S ELK LAKE ROAD
 City WILLIAMSBURG State MI Zip Code 49690-8519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BOARDING KENNEL OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376235
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SMITH, SHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11535 S ELK LAKE ROAD
 City WILLIAMSBURG State MI Zip Code 49690-8519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BOARDING KENNEL OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410135
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4540 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SPENCER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27990 ROAD P
 City DOLORES State CO Zip Code 81323-9268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPENCER SMITH Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380484
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. SMITH, SPENCER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27990 ROAD P
 City DOLORES State CO Zip Code 81323-9268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPENCER SMITH Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390215
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. SMITH, SPENCER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27990 ROAD P
 City DOLORES State CO Zip Code 81323-9268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPENCER SMITH Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.398055
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4541 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SPENCER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27990 ROAD P
 City DOLORES State CO Zip Code 81323-9268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPENCER SMITH Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403557
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SMITH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1246 FORREST HILL DRIVE
 City LOWER GWYNEDD State PA Zip Code 19002-2058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406961
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SMITH, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BURMONT ROAD
 City DREXEL HILL State PA Zip Code 19026-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCMH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348381
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4542 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BURMONT ROAD
 City DREXEL HILL State PA Zip Code 19026-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCMH Occupation (for Individual) RN
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383119
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. SMITH, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BURMONT ROAD
 City DREXEL HILL State PA Zip Code 19026-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCMH Occupation (for Individual) RN
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383120
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. SMITH, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BURMONT ROAD
 City DREXEL HILL State PA Zip Code 19026-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DCMH Occupation (for Individual) RN
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399828
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4543 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, THERESA, M., ,

Mailing Address 43 FALCON WAY

City NORTH CONWAY State NH Zip Code 03860-7924

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
297.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357535

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, THERESA, M., ,

Mailing Address 43 FALCON WAY

City NORTH CONWAY State NH Zip Code 03860-7924

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
297.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363760

Amount of Each Receipt this Period
27.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, THERESA, M., ,

Mailing Address 43 FALCON WAY

City NORTH CONWAY State NH Zip Code 03860-7924

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
297.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.371451

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 89.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4544 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, THERESA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 FALCON WAY

City NORTH CONWAY	State NH	Zip Code 03860-7924
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382718

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

B. SMITH, THERESA, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 FALCON WAY

City NORTH CONWAY	State NH	Zip Code 03860-7924
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413001

Amount of Each Receipt this Period
27.00

Memo Item
CONTRIBUTION

C. SMITH, THOMAS, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 BUTTS RD STE 320

City BOCA RATON	State FL	Zip Code 33431-7453
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRESCOTT INVESTMENTS	Occupation (for Individual) MANANGING DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.364192

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100054.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:		PAGE 4545 OF 5722	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 MASTERS CIR
 City LITTLE ROCK State AR Zip Code 72212-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAD CON Occupation (for Individual) MEDICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355615
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SMITH, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 MASTERS CIR
 City LITTLE ROCK State AR Zip Code 72212-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAD CON Occupation (for Individual) MEDICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359097
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SMITH, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 MASTERS CIR
 City LITTLE ROCK State AR Zip Code 72212-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAD CON Occupation (for Individual) MEDICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359099
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4546 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, VERONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21118 DUSTY GLEN LN.
 City SPRING State TX Zip Code 77379-8227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346696
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SMITH, VERONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21118 DUSTY GLEN LN.
 City SPRING State TX Zip Code 77379-8227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363898
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SMITH, VERONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21118 DUSTY GLEN LN.
 City SPRING State TX Zip Code 77379-8227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392156
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4547 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, VERONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21118 DUSTY GLEN LN.
 City SPRING State TX Zip Code 77379-8227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394364
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12807 NE 26TH PL
 City BELLEVUE State WA Zip Code 98005-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348556
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12807 NE 26TH PL
 City BELLEVUE State WA Zip Code 98005-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348562
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4548 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, WILLETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2697 MONTAGUE CT W
 City CLEARWATER State FL Zip Code 33761-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARBITRATION FORUMS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368870
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12807 NE 26TH PL
 City BELLEVUE State WA Zip Code 98005-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403206
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12807 NE 26TH PL
 City BELLEVUE State WA Zip Code 98005-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403208
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4549 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMOTKIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 PENSHURST LANE
 City PENN VALLEY State PA Zip Code 19072-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST Occupation (for Individual) SVP GLOBAL GOVERNMENT AFFAIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408740
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SNEAD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9144 LEGHORN PLACE
 City FAIRFAX State VA Zip Code 22031-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IDA Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 07 / 11 / 2016
Transaction ID : SA11A.346953
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. SNEAD, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9144 LEGHORN PLACE
 City FAIRFAX State VA Zip Code 22031-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IDA Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396635
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1231.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4550 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNEED JR., ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 7376
 City ASHEVILLE State NC Zip Code 28802-8506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN WINKLE LAW FIRM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.389369
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SNEED, ALBERT, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 RACQUET CLUB ROAD
 City ASHEVILLE State NC Zip Code 28803-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358778
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SNELLMAN, KAJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8255 MEREDITH PL.
 City VERO BEACH State FL Zip Code 32968-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409646
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4551 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNELLMAN, KAJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8255 MEREDITH PL.
 City VERO BEACH State FL Zip Code 32968-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411660
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SNELL, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4515 N DROMEDARY ROAD
 City PHOENIX State AZ Zip Code 85018-2938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.355819
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SNIDER, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 BAYNARD COVE
 City HILTON HEAD ISLAND State SC Zip Code 29928-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386694
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4552 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNIDER, NED, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3124 NORTH NELSON
 City ARLINGTON State VA Zip Code 22207-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372241
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SNIDER, NED, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3124 NORTH NELSON
 City ARLINGTON State VA Zip Code 22207-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372247
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SNIDER, NED, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3124 NORTH NELSON
 City ARLINGTON State VA Zip Code 22207-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.385142
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4553 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNIDER, NED, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3124 NORTH NELSON
 City ARLINGTON State VA Zip Code 22207-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399837
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SNIDER, NED, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3124 NORTH NELSON
 City ARLINGTON State VA Zip Code 22207-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399962
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SNITH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 MILAN. SUITE 1960
 City HOUSTON State TX Zip Code 77002-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH ISLAND OIL Occupation (for Individual) LANDMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352454
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4554 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNITH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 MILAN. SUITE 1960
 City HOUSTON State TX Zip Code 77002-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH ISLAND OIL Occupation (for Individual) LANDMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.377493
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SNITH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 MILAN. SUITE 1960
 City HOUSTON State TX Zip Code 77002-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH ISLAND OIL Occupation (for Individual) LANDMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SNOKE, GEORGIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 E 85TH STREET
 City TULSA State OK Zip Code 74137-1918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375283
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4555 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNOW, CAROLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 TEMPSFORD LANE

City RICHMOND	State VA	Zip Code 23226-2319
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369549

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SNOW, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 TEMPSFORD LANE

City RICHMOND	State VA	Zip Code 23226-2319
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSX	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379107

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. SNOW, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 S ANITA AVENUE

City LOS ANGELES	State CA	Zip Code 90049-3805
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383263

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4556 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SNYDER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2399 CAMINO DEL RIO SOUTH
 102
 City SAN DIEGO State CA Zip Code 92108-3606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R.A. SNYDER PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394458
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SOBIESKI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4057
 City JACKSON State WY Zip Code 83001-4057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415324
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SOCHAN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13125 ELEVENTH STREET
 City BOWIE State MD Zip Code 20715-3725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWIE STATE UNIVERSITY Occupation (for Individual) PROFESSOR OF HISTORY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.354882
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4557 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOCHAN, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 13125 ELEVENTH STREET
City BOWIE State MD Zip Code 20715-3725
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BOWIE STATE UNIVERSITY Occupation (for Individual) PROFESSOR OF HISTORY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.356191
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SOCHAN, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 13125 ELEVENTH STREET
City BOWIE State MD Zip Code 20715-3725
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) BOWIE STATE UNIVERSITY Occupation (for Individual) PROFESSOR OF HISTORY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409113
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SODEN, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 550 OKEECHOBEE BLVD 1502
City WEST PALM BEACH State FL Zip Code 33401-6317
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COMPOSER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 268.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.363736
Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	559.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4558 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SODEN, BILL, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016
Mailing Address 550 OKEECHOBEE BLVD 1502		Transaction ID : SA11A.384321
City WEST PALM BEACH	State FL	Zip Code 33401-6317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COMPOSER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SODEN, BILL, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016
Mailing Address 550 OKEECHOBEE BLVD 1502		Transaction ID : SA11A.384345
City WEST PALM BEACH	State FL	Zip Code 33401-6317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COMPOSER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SODEN, BILL, , ,		Date of Receipt MM / DD / YYYY 09 / 19 / 2016
Mailing Address 550 OKEECHOBEE BLVD 1502		Transaction ID : SA11A.399246
City WEST PALM BEACH	State FL	Zip Code 33401-6317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COMPOSER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 268.00	

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4559 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SODERHOLM, PAUL, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7578 W PINES RD

City MOUNT MORRIS	State IL	Zip Code 61054-9756
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSERVATIONIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.356510

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SODERHOLM, PAUL, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7578 W PINES RD

City MOUNT MORRIS	State IL	Zip Code 61054-9756
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSERVATIONIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379674

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SOFFA, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 735 14TH AVENUE

City SAN FRANCISCO	State CA	Zip Code 94118-3503
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIM SPECIALTY HEALTH INC.	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
309.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391708

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4560 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SOHN, RICHARD, F., ,
 Mailing Address 62 N RIVER DR
 City ROSEBURG State OR Zip Code 97470-9473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.367898
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SOKOL, DAVID, L., ,
 Mailing Address PO BOX 2080
 City WILSON State WY Zip Code 83014-2080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TETON CAPITAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391362
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SOLA, ANTHONY, , ,
 Mailing Address 9 CANERBURY RD
 City OLD BROOKVILLE State NY Zip Code 11545-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTIN CLEARWATER & BELL LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349179
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4561 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLACE, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 N POWER RD., STE 113-237
 City MESA State AZ Zip Code 85215-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382110
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SOLACE, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2824 N POWER RD., STE 113-237
 City MESA State AZ Zip Code 85215-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407543
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SOLADAY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10232 HATHERLEIGH DRIVE
 City BETHESDA State MD Zip Code 20814-2224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.370985
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4562 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLINKSY, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3711 MORROW LANE
 City CHICO State CA Zip Code 95928-8865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394977
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. SOLOMON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BRAESHEATHER DR
 City HOUSTON State TX Zip Code 77096-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350941
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SOLOMON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BRAESHEATHER DR
 City HOUSTON State TX Zip Code 77096-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374728
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4563 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLOMON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BRAESHEATHER DR
 City HOUSTON State TX Zip Code 77096-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399753
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SOLOMON, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 QUAYSIDE DRIVE
 City JUPITER State FL Zip Code 33477-4036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396556
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SOLOMONS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2419 CALIFORNIA ST NW
 City WASHINGTON State DC Zip Code 20008-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389549
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4564 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLOMON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 ROANOKE DRIVE
 City SPRINGFIELD State IL Zip Code 62702-3443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOLOMON COLORS, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351941
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SOLOMAN, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 984 SINGING RIDGE ROAD
 City EL CAJON State CA Zip Code 92019-2764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.377691
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. SOLOMON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1305 HARBOR ROAD
 City HEWLETT State NY Zip Code 11557-2640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358720
 Amount of Each Receipt this Period
 400.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4565 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOMMER, BENJAMIN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1103 E HOFFORD COURT
 City PEORIA State IL Zip Code 61614-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354245
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SOMMER, BENJAMIN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1103 E HOFFORD COURT
 City PEORIA State IL Zip Code 61614-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407125
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352549
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4566 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392166
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415458
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SOMMERFELD, MARGO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422819
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4567 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOMMERS, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8711 EAGLEBROOK CT

City ALEXANDRIA	State VA	Zip Code 22308-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN INVESTMENT COUNCIL	Occupation (for Individual) PRESIDENT/CEO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.382507

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

B. SONGSTAD, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23835 BLUEHILL BAY

City DANA POINT	State CA	Zip Code 92629-4402
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SONGSTAD RANDALL COFFEE & HUMPHREY	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 30 / 2016
Transaction ID : SA11A.387547

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SONGSTAD, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23835 BLUEHILL BAY

City DANA POINT	State CA	Zip Code 92629-4402
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SONGSTAD RANDALL COFFEE & HUMPHREY	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.406337

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4568 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SONGSTAD, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23835 BLUEHILL BAY

City DANA POINT	State CA	Zip Code 92629-4402
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SONGSTAD RANDALL COFFEE & HUMPHREY	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415543

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SONGSTAD, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23835 BLUEHILL BAY

City DANA POINT	State CA	Zip Code 92629-4402
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SONGSTAD RANDALL COFFEE & HUMPHREY	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419454

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SONNEGA, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4389 BURNSIDE ROAD

City SEBASTOPOL	State CA	Zip Code 95472-9496
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.362796

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4569 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SONNEGA, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4389 BURNSIDE ROAD
 City SEBASTOPOLE State CA Zip Code 95472-9496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411743
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SOO, LIANG, Y., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 FRIDAY LANE
 City CHAPEL HILL State NC Zip Code 27514-3231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366270
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SOO, LIANG, Y., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 FRIDAY LANE
 City CHAPEL HILL State NC Zip Code 27514-3231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400415
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4570 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SOPHER, EVELYN, , ,

Mailing Address 3243 LEPREHAUN LN

City PALM HARBOR State FL Zip Code 34683-2325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2016

Transaction ID : SA11A.348991

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SOPHER, EVELYN, , ,

Mailing Address 3243 LEPREHAUN LN

City PALM HARBOR State FL Zip Code 34683-2325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016

Transaction ID : SA11A.350886

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SOPHER, EVELYN, , ,

Mailing Address 3243 LEPREHAUN LN

City PALM HARBOR State FL Zip Code 34683-2325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11A.356404

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4571 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SOPHER, EVELYN, , ,

Mailing Address 3243 LEPREHAUN LN

City PALM HARBOR State FL Zip Code 34683-2325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : SA11A.382639

Amount of Each Receipt this Period
 30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SOPHER, EVELYN, , ,

Mailing Address 3243 LEPREHAUN LN

City PALM HARBOR State FL Zip Code 34683-2325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 09 / 16 / 2016
Transaction ID : SA11A.398570

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SOPHER, EVELYN, , ,

Mailing Address 3243 LEPREHAUN LN

City PALM HARBOR State FL Zip Code 34683-2325

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.417560

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4572 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SORENSON, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5741 RIDGE CREEK ROAD
 City MURRAY State UT Zip Code 84107-6599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388476
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINTENANCE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357580
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINTENANCE DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382513
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4573 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINTENANCE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382810
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINTENANCE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394168
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINTENANCE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394170
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4574 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826

City HONOLULU	State HI	Zip Code 96817-0826
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD	Occupation (for Individual) MAINTENANCE DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394176

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826

City HONOLULU	State HI	Zip Code 96817-0826
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD	Occupation (for Individual) MAINTENANCE DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394177

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826

City HONOLULU	State HI	Zip Code 96817-0826
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD	Occupation (for Individual) MAINTENANCE DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413037

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4575 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINTENANCE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415504
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SOUZA, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 17826
 City HONOLULU State HI Zip Code 96817-0826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCABE HAMILTON & RENNY CO LTD Occupation (for Individual) MAINTENANCE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415505
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SOWISLO, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 TILBURY RD.
 City BLOOMFIELD HILLS State MI Zip Code 48301-2742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USMM,LLC Occupation (for Individual) HEALTHCARE FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404809
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4576 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SPACEK, HELEN, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 4800 N 68TH STREET UNIT 241		Transaction ID : SA11A.381298
City SCOTTSDALE	State AZ	Zip Code 85251-1115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SPACKMAN, CHARLES, T., MR.,		Date of Receipt MM / DD / YYYY 08 / 11 / 2016
Mailing Address 595 FELLOWSHIP ROAD		Transaction ID : SA11A.364277
City CHESTER SPRINGS	State PA	Zip Code 19425-3618
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SPACKMAN, CHARLES, T., MR.,		Date of Receipt MM / DD / YYYY 08 / 29 / 2016
Mailing Address 595 FELLOWSHIP ROAD		Transaction ID : SA11A.380941
City CHESTER SPRINGS	State PA	Zip Code 19425-3618
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4577 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPAINHOUR, DAVID, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 311 MEADOWBROOK DRIVE

City SANTA BARBARA	State CA	Zip Code 93108-2683
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.369269

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. SPAIN, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7335 VIA LORADO

City RANCHO PALOS VERDE	State CA	Zip Code 90275-4463
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.00	

Date of Receipt
MM / DD / YYYY
08 / 12 / 2016

Transaction ID : SA11A.365696

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SPAIN, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7335 VIA LORADO

City RANCHO PALOS VERDE	State CA	Zip Code 90275-4463
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 377.00	

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.387392

Amount of Each Receipt this Period
105.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	405.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4578 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPANGENBERG, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17637 W WINNEBAGO DRIVE
 City GRAYSLAKE State IL Zip Code 60030-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDMASTER CORP Occupation (for Individual) REGIONAL SALES MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.349927
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SPANGENBERG, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17637 W WINNEBAGO DRIVE
 City GRAYSLAKE State IL Zip Code 60030-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDMASTER CORP Occupation (for Individual) REGIONAL SALES MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366585
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SPANGENBERG, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17637 W WINNEBAGO DRIVE
 City GRAYSLAKE State IL Zip Code 60030-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDMASTER CORP Occupation (for Individual) REGIONAL SALES MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384712
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4579 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPANGENBERG, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17637 W WINNEBAGO DRIVE
 City GRAYSLAKE State IL Zip Code 60030-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDMASTER CORP Occupation (for Individual) REGIONAL SALES MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403417
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SPANGENBERG, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17637 W WINNEBAGO DRIVE
 City GRAYSLAKE State IL Zip Code 60030-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDMASTER CORP Occupation (for Individual) REGIONAL SALES MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403433
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SPANGENBERG, CHARLES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17637 W WINNEBAGO DRIVE
 City GRAYSLAKE State IL Zip Code 60030-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDMASTER CORP Occupation (for Individual) REGIONAL SALES MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417692
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4580 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPANIOL, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 RADNOR ROAD
 City BETHESDA State MD Zip Code 20817-6281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMC CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415368
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SPANIOL, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 RADNOR ROAD
 City BETHESDA State MD Zip Code 20817-6281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMC CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415369
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SPANNUTH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 688
 City HAMILTON State MT Zip Code 59840-0688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352198
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4581 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPANNUTH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 688
 City HAMILTON State MT Zip Code 59840-0688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.370470
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SPANNUTH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 688
 City HAMILTON State MT Zip Code 59840-0688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384645
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SPANNUTH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 688
 City HAMILTON State MT Zip Code 59840-0688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.384646
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4582 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPANOS, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 TRINITY PKWY 5TH FL
 City STOCKTON State CA Zip Code 95219-7242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AG SPANOS COMPANIES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421190
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. SPAR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13266 ANDALUSIA DRIVE
 City SANTA ROSA VALLEY State CA Zip Code 93012-9050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400377
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SPARKMAN, J., D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 WELLINGTON PL
 City FINDLAY State OH Zip Code 45840-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367944
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	52950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4583 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPEARE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2581 SAND HILLS AVE
 City GRAND FORKS State ND Zip Code 58201-9229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398945
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SPEESE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5600 CHAMPIONS DRIVE
 City PLANO State TX Zip Code 75093-4228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.346250
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

C. SPENCE, CORINNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 EUREKA RD
 City ROSEVILLE State CA Zip Code 95661-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 16998.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2016
Transaction ID : SA11A.389191
 Amount of Each Receipt this Period
 999.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3949.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4584 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SPENCE, CORINNE, , ,

Mailing Address 1508 EUREKA RD

City ROSEVILLE	State CA	Zip Code 95661-2809
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16998.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2016

Transaction ID : SA11A.389192

Amount of Each Receipt this Period
999.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SPENCE, CORINNE, , ,

Mailing Address 1508 EUREKA RD

City ROSEVILLE	State CA	Zip Code 95661-2809
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16998.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405385

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SPENCE, CORINNE, , ,

Mailing Address 1508 EUREKA RD

City ROSEVILLE	State CA	Zip Code 95661-2809
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
16998.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405386

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10999.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4585 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SPENCE, CORINNE, , ,

Mailing Address **1508 EUREKA RD**

City **ROSEVILLE** State **CA** Zip Code **95661-2809**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **16998.00**

Date of Receipt **09 / 23 / 2016**

Transaction ID : SA11A.405387

Amount of Each Receipt this Period **5000.00**

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SPENCER, PAUL, E., MR.,

Mailing Address **19475 BEACON LITE ROAD**

City **MONUMENT** State **CO** Zip Code **80132-9638**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **09 / 13 / 2016**

Transaction ID : SA11A.394240

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SPENCER, PAUL, E., MR.,

Mailing Address **19475 BEACON LITE ROAD**

City **MONUMENT** State **CO** Zip Code **80132-9638**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **09 / 13 / 2016**

Transaction ID : SA11A.394242

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **5500.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4586 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SPENCE, TANCY, , ,

Mailing Address **2728 COUNTRY LANE**

City BILLINGS	State MT	Zip Code 59106-1540
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391903

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SPENCE, TANCY, , ,

Mailing Address **2728 COUNTRY LANE**

City BILLINGS	State MT	Zip Code 59106-1540
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391904

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SPICIARICH, JOHN, , ,

Mailing Address **29165 CLOVER LANE**

City BIG PINE KEY	State FL	Zip Code 33043-6046
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Transaction ID : SA11A.353296

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4587 OF 5722
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPICIARICH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29165 CLOVER LANE
 City BIG PINE KEY State FL Zip Code 33043-6046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353298
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SPIEGEL, AUDREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2403 FOX MEADOW LANE
 City NORTHFIELD State IL Zip Code 60093-4302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.401780
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. SPIEGEL, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 BALBOA COVES
 City NEWPORT BEACH State CA Zip Code 92663-3226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360227
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4588 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIEGEL, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 BALBOA COVES
 City NEWPORT BEACH State CA Zip Code 92663-3226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362385
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SPIELES, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 PARKSIDE DR
 City WAUSEON State OH Zip Code 43567-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359870
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. SPIELES, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 PARKSIDE DR
 City WAUSEON State OH Zip Code 43567-9267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398989
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4589 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIELES, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 649 PARKSIDE DR
City WAUSEON State OH Zip Code 43567-9267
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422635
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SPIELES, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 649 PARKSIDE DR
City WAUSEON State OH Zip Code 43567-9267
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422642
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SPIES, AVIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 60 HEYBURN RD
City CHADDS FORD State PA Zip Code 19317-9707
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 441.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372226
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4590 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397756
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397758
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397759
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 41.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4591 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397770
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397781
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401336
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4592 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405060
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410348
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SPIES, AVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410349
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4593 OF 5722
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIES, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 ARGYLE COURT

City LIVINGSTON	State NJ	Zip Code 07039-4201
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : SA11A.366627

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SPIES, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 ARGYLE COURT

City LIVINGSTON	State NJ	Zip Code 07039-4201
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : SA11A.366628

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SPIES, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 ARGYLE COURT

City LIVINGSTON	State NJ	Zip Code 07039-4201
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.411631

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4594 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347495
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354630
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374537
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4595 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.382275
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384223
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385972
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4596 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386798
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394448
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398066
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4597 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399319
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399656
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SPIKES, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 578
 City HUGOTON State KS Zip Code 67951-0578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401241
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4598 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SPIKES, WARREN, W., MR.,			Date of Receipt
Mailing Address PO BOX 578			<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City HUGOTON	State KS	Zip Code 67951-0578	Transaction ID : SA11A.407934
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SPIKES, WARREN, W., MR.,			Date of Receipt
Mailing Address PO BOX 578			<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2016"/>
City HUGOTON	State KS	Zip Code 67951-0578	Transaction ID : SA11A.410115
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SPIKES, WARREN, W., MR.,			Date of Receipt
Mailing Address PO BOX 578			<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2016"/>
City HUGOTON	State KS	Zip Code 67951-0578	Transaction ID : SA11A.410122
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4599 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPILLMAN, JAMES, A., LT. COL.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 805 S LEE POBOX354
PO BOX 354

City SANTA ANNA State TX Zip Code 76878-0354

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2016

Transaction ID : SA11A.352409

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SPILLMAN, JAMES, A., LT. COL.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 805 S LEE POBOX354
PO BOX 354

City SANTA ANNA State TX Zip Code 76878-0354

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016

Transaction ID : SA11A.374482

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SPILLMAN, JAMES, A., LT. COL.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 805 S LEE POBOX354
PO BOX 354

City SANTA ANNA State TX Zip Code 76878-0354

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
438.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2016

Transaction ID : SA11A.375887

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4600 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPILLMAN, JAMES, A., LT. COL.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 805 S LEE POBOX354
PO BOX 354

City SANTA ANNA State TX Zip Code 76878-0354

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.00

Date of Receipt
09 / 21 / 2016
Transaction ID : SA11A.401442

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SPILLAR, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6625 CLIFFORD DRIVE

City CUPERTINO State CA Zip Code 95014-4530

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
07 / 11 / 2016
Transaction ID : SA11A.346548

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. SPILLAR, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6625 CLIFFORD DRIVE

City CUPERTINO State CA Zip Code 95014-4530

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.365128

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 110.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4601 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPILLAR, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6625 CLIFFORD DRIVE
 City CUPERTINO State CA Zip Code 95014-4530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393727
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. SPILLAR, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6625 CLIFFORD DRIVE
 City CUPERTINO State CA Zip Code 95014-4530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402577
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SPILLANE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360322
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5055.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4602 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386742
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390279
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394307
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4603 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394310
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394318
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394321
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4604 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405723
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SPIVACK, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 FIFTH AVENUE
 7E
 City NEW YORK State NY Zip Code 10065-7268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419079
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SPIVEY, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 HOFFMAN RD
 332
 City GREEN BAY State WI Zip Code 54311-6299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348533
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4605 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPIVEY, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 HOFFMAN RD
 332
 City GREEN BAY State WI Zip Code 54311-6299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391315
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SPIVEY, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 HOFFMAN RD
 332
 City GREEN BAY State WI Zip Code 54311-6299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391317
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SPIVEY, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1660 HOFFMAN RD
 332
 City GREEN BAY State WI Zip Code 54311-6299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416305
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4606 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SPOON, ED, , DR.,			Date of Receipt
Mailing Address 624 CANYON GREENS			<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2016"/>
City LAS VEGAS	State NV	Zip Code 89144-0832	Transaction ID : SA11A.363290
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) LAS VEGAS OB/GYN		Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="850.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SPOON, ED, , DR.,			Date of Receipt
Mailing Address 624 CANYON GREENS			<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2016"/>
City LAS VEGAS	State NV	Zip Code 89144-0832	Transaction ID : SA11A.365400
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer (for Individual) LAS VEGAS OB/GYN		Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="850.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SPOON, ED, , DR.,			Date of Receipt
Mailing Address 624 CANYON GREENS			<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2016"/>
City LAS VEGAS	State NV	Zip Code 89144-0832	Transaction ID : SA11A.372642
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) LAS VEGAS OB/GYN		Occupation (for Individual) PHYSICIAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="850.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="700.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4607 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPOUSTA, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2668
 City HOBBS State NM Zip Code 88241-2668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SALVATION ARMY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346961
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SPOUSTA, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2668
 City HOBBS State NM Zip Code 88241-2668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SALVATION ARMY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.354835
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SPOUSTA, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2668
 City HOBBS State NM Zip Code 88241-2668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SALVATION ARMY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.354838
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4608 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPOUSTA, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2668
 City HOBBS State NM Zip Code 88241-2668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SALVATION ARMY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.377501
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SPOUSTA, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2668
 City HOBBS State NM Zip Code 88241-2668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SALVATION ARMY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.377502
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SPOUSTA, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2668
 City HOBBS State NM Zip Code 88241-2668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SALVATION ARMY Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401408
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4609 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401410

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SPOUSTA, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2668

City HOBBS	State NM	Zip Code 88241-2668
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE SALVATION ARMY	Occupation (for Individual) MINISTER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417981

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SPRAKER, TERRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7136 ECHO RIDGE DRIVE

City SAN JOSE	State CA	Zip Code 95120-4718
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.373322

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4610 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPRINGER, DANIEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8665 HOPEDALE ROAD
 City HOPEDEALE State IL Zip Code 61747-9675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS CREDIT Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392403
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

B. SPRINGBERG, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 REVEDRO ST.
 City LAS VEGAS State NV Zip Code 89135-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362236
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. SPRINGBERG, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 REVEDRO ST.
 City LAS VEGAS State NV Zip Code 89135-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407638
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2825.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4611 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SPRINGBERG, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 REVEDRO ST.
 City LAS VEGAS State NV Zip Code 89135-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407643
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. SPRINGBERG, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5045 REVEDRO ST.
 City LAS VEGAS State NV Zip Code 89135-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407644
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. SPRINGER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 CIRCLE AVENUE
 City RIDGEWOOD State NJ Zip Code 07450-5207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORPORATE RESOLUTIONS INC Occupation (for Individual) INVESTIGATIVE CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404870
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4612 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPRINKLE, JR., STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5816 OAK CREEK LANE
 City GREENWOOD VILLAGE State CO Zip Code 80121-1555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRINKLE & ASSOCIATES LLC Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419007
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. SPROUSE, DONNA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 788
 City FRENCH CAMP State CA Zip Code 95231-0788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344551
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. SPROUSE, DONNA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 788
 City FRENCH CAMP State CA Zip Code 95231-0788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357099
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4613 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SPRUNK, ERIC, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 2150 NW 139TH PL		Transaction ID : SA11A.367976
City PORTLAND	State OR	Zip Code 97229-8119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) NIKE	Occupation (for Individual) COO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SPUHLER, ROBERT, H., MR.,		Date of Receipt MM / DD / YYYY 07 / 31 / 2016
Mailing Address 224 MEADOW LANE		Transaction ID : SA11A.359493
City GLENWOOD SPRINGS	State CO	Zip Code 81601-9516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SPUHLER, ROBERT, H., MR.,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016
Mailing Address 224 MEADOW LANE		Transaction ID : SA11A.407546
City GLENWOOD SPRINGS	State CO	Zip Code 81601-9516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional).....▶	11500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4614 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SPURLOCK, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 PEACHTREE CIRCLE

City ATLANTA	State GA	Zip Code 30309-3204
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPURLOCK@ASSOCIATES INC	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.401002

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. SROCHI, STANLEY, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 820 W PACE FY ROAD NW

City ATLANTA	State GA	Zip Code 30327-2646
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389419

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. ST LAURENT, ELEANOR, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5115 DUBOIS DR

City VANCOUVER	State WA	Zip Code 98661-6614
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.409330

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4615 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ST LAURENT, ELEANOR, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5115 DUBOIS DR

City VANCOUVER	State WA	Zip Code 98661-6614
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Date of Receipt
09 / 30 / 2016
Transaction ID : **SA11A.422023**

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Date of Receipt
07 / 31 / 2016
Transaction ID : **SA11A.360241**

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 425.00	

Date of Receipt
08 / 25 / 2016
Transaction ID : **SA11A.379826**

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4616 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384200

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398250

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399627

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4617 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAAB, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6655 BOTTLEBRUSH LN
 City NAPLES State FL Zip Code 34109-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404296
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STAAB, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6655 BOTTLEBRUSH LN
 City NAPLES State FL Zip Code 34109-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411653
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STACH, DEIRDRE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5309 DUVALL DRIVE
 City BETHESDA State MD Zip Code 20816-1873
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLARK & WEINSTOCK Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398465
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4618 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STACKPOLE, THOMAS, SCOTT, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 699 MAURUS STREET
 City SAINT MARYS State PA Zip Code 15857-1023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406757
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. STADLER, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11916 N 118TH STREET
 City SCOTTSDALE State AZ Zip Code 85259-3216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365432
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. STAHL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 372 ELDER LANE
 City WINNETKA State IL Zip Code 60093-4268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 409.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351092
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1550.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4619 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STAHL, ROBERT, , ,

Mailing Address **372 ELDER LANE**

City WINNETKA	State IL	Zip Code 60093-4268
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.00

Date of Receipt
08 / 12 / 2016

Transaction ID : SA11A.365734

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STAHL, ROBERT, , ,

Mailing Address **372 ELDER LANE**

City WINNETKA	State IL	Zip Code 60093-4268
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.00

Date of Receipt
08 / 30 / 2016

Transaction ID : SA11A.383657

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STAHL, ROBERT, , ,

Mailing Address **372 ELDER LANE**

City WINNETKA	State IL	Zip Code 60093-4268
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
409.00

Date of Receipt
08 / 30 / 2016

Transaction ID : SA11A.383660

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4620 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAHL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 372 ELDER LANE

City WINNETKA	State IL	Zip Code 60093-4268
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
409.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390482

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. STAHLY, RODERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4721 MESA

City KEARNEY	State NE	Zip Code 68845-1601
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYEED	Occupation (for Individual) REAL ESTATE APPRAISER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419104

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. STAHL, STEPHANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1849 SOUTH ULSTER ST.

City DENVER	State CO	Zip Code 80231-8006
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.385029

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4621 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAKER, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 860 W CENTER ST
 City PROVO State UT Zip Code 84601-4018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARPETS AMERICA Occupation (for Individual) FLOORING SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419269
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STAMM, J. RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 VALLEY RIDGE ROAD
 City HAVERFORD State PA Zip Code 19041-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRICE WATERHOUSE COOPERS LLP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366494
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. STANCELL, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 WOODSIDE DRIVE
 City GREENWICH State CT Zip Code 06830-6729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSUTLANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376689
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4622 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANDEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8586 HAUSER COURT

City LENEXA	State KS	Zip Code 66215-4546
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409948

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. STANDEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8586 HAUSER COURT

City LENEXA	State KS	Zip Code 66215-4546
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409950

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. STANDISH, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 POINT BEACH DRIVE

City MILFORD	State CT	Zip Code 06460-7642
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COASTAL PALLET CORP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11A.376707

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4623 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANFORD, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 E 41ST ST
 City SIOUX FALLS State SD Zip Code 57103-4840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359043
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STANG, TROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12136 N 138TH ST
 City SCOTTSDALE State AZ Zip Code 85259-3759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWEST CREDIT UNION ASSOCIATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367934
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. STANICEK, BLAIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SHERWOOD STREET UNIT 200
 City GREENVILLE State SC Zip Code 29601-3770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394776
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4624 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANLEY, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5900 MOSTELLER DRIVE
62

City OKLAHOMA CITY State OK Zip Code 73112-4600

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE HEFNER COMPANY, INC. Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350021

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. STANLEY, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5900 MOSTELLER DRIVE
62

City OKLAHOMA CITY State OK Zip Code 73112-4600

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE HEFNER COMPANY, INC. Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378844

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. STANLEY, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5900 MOSTELLER DRIVE
62

City OKLAHOMA CITY State OK Zip Code 73112-4600

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE HEFNER COMPANY, INC. Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378845

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4625 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANLEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5900 MOSTELLER DRIVE
 62
 City OKLAHOMA CITY State OK Zip Code 73112-4600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HEFNER COMPANY, INC. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380471
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STANLEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5900 MOSTELLER DRIVE
 62
 City OKLAHOMA CITY State OK Zip Code 73112-4600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HEFNER COMPANY, INC. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399391
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. STANLEY, RICHARD, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 SUGAR HILL DR
 City NASHUA State NH Zip Code 03063-2819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356593
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4626 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANSFIELD, ENOCH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5825 CASA GRANDE AVENUE

City ROCKLIN	State CA	Zip Code 95677-2614
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.377012

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. STANSBURY, HENRY, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6200 FOXHALL FARM ROAD

City CATONSVILLE	State MD	Zip Code 21228-5306
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11A.362795

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSULTANT	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2016

Transaction ID : SA11A.346645

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4627 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTANT Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366633
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTANT Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374542
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTANT Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388597
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4628 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSULTANT	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399982

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSULTANT	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411600

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STANTON-HICKS, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11405, CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSULTANT	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411746

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4629 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTANT Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418675
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STANTON-HICKS, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405, CLEARFIELD LANE
 City CHARDON State OH Zip Code 44024-9051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTANT Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418678
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. STARKER, B., BOND, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 809
 City CORVALLIS State OR Zip Code 97339-0809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARKER FORESTS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.361548
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4630 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STARK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 285 AVENUE C
 7B
 City NEW YORK State NY Zip Code 10009-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYCT Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386286
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STARK, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 285 AVENUE C
 7B
 City NEW YORK State NY Zip Code 10009-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYCT Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407755
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STARKLE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2008 E MARSHALL AVENUE
 City PHOENIX State AZ Zip Code 85016-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIMEPIECE CAPITAL INC Occupation (for Individual) BUSINESS INVESTMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376447
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4631 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STARK, RICHARD, , DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 E EAGLE LAKE DRIVE
 City KALAMAZOO State MI Zip Code 49009-8426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KALAMAZOO ANESTHESIOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414717
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STARK, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 CALLEDELOSAMIGOS
 City SANTA BARBARA State CA Zip Code 93105-5467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359887
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STARK, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 CALLEDELOSAMIGOS
 City SANTA BARBARA State CA Zip Code 93105-5467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384786
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4632 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STARK, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 CALLEDELOSAMIGOS
 City SANTA BARBARA State CA Zip Code 93105-5467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419628
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STARN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 12378
 City ASPEN State CO Zip Code 81612-9240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381383
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362355
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4633 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362500
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.389185
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4634 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393687
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STARSHAK, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4852 WOODRIDGE COURT S
 City MINNETONKA State MN Zip Code 55345-3935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388891
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. STAS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345 PRINCETON PLACE
 City WEXFORD State PA Zip Code 15090-8707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PGW Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4635 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAS, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1345 PRINCETON PLACE
 City WEXFORD State PA Zip Code 15090-8707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PGW Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.388875
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352730
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368339
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4636 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11A.374272

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11A.383185

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11A.384161

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4637 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388423

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391195

Amount of Each Receipt this Period
125.00

Memo Item
CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1507 EDITH STREET

City BERKELEY	State CA	Zip Code 94703-1123
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) COACH
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391664

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4638 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402540
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404402
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4639 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404658
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410137
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411419
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4640 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418072
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STASNEY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1722 NORMANDY LANE
 City MIDLAND State TX Zip Code 79705-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364768
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STASNEY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1722 NORMANDY LANE
 City MIDLAND State TX Zip Code 79705-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383776
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4641 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASNEY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1722 NORMANDY LANE
 City MIDLAND State TX Zip Code 79705-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383777
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STASNEY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1722 NORMANDY LANE
 City MIDLAND State TX Zip Code 79705-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383790
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. STATON, ROBERT, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 TALL OAK LANE
 City FLAT ROCK State NC Zip Code 28731-8566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378234
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4642 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAUFFER, EDGAR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3026 BOWERS MILL ROAD
 City PENNSBURG State PA Zip Code 18073-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361512
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STAUFFER, EDGAR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3026 BOWERS MILL ROAD
 City PENNSBURG State PA Zip Code 18073-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401052
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STAUFFER, EDGAR, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3026 BOWERS MILL ROAD
 City PENNSBURG State PA Zip Code 18073-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416652
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4643 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAUFFER, EDGAR, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3026 BOWERS MILL ROAD

City PENNSBURG	State PA	Zip Code 18073-1904
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.416663

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. STAUFFER, LOIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 WARWICK LANE

City ROCKY RIVER	State OH	Zip Code 44116-2305
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.378723

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. STAVIK, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 E ALEXANDER PALM ROAD

City BOCA RATON	State FL	Zip Code 33432-7985
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PINNACLE HOLDINGS INC	Occupation (for Individual) REAL ESTATE INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016

Transaction ID : SA11A.392612

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4644 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEAGALL, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 W LAKE SHORE DRIVE

City WOODSTOCK	State IL	Zip Code 60098-6920
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WOOLF DISTRIBUTING	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 23 / 2016
Transaction ID : SA11A.377188

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. STEARNS, GLENN, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3185 TUCKER RANCH PL

City WILSON	State WY	Zip Code 83014-9703
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEARNS LENDING	Occupation (for Individual) MORTGAGE LENDER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
09 / 21 / 2016
Transaction ID : SA11A.400514

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. STEBBINS, JERRY, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 376 LYONS ROAD

City DECATUR	State AL	Zip Code 35603-5034
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
08 / 04 / 2016
Transaction ID : SA11A.362180

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4645 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEBBINS, JERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 LYONS ROAD
 City DECATUR State AL Zip Code 35603-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382967
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STEBBINS, JERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 LYONS ROAD
 City DECATUR State AL Zip Code 35603-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382968
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STEBBINS, JERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 LYONS ROAD
 City DECATUR State AL Zip Code 35603-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382969
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4646 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEBBINS, JERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 LYONS ROAD
 City DECATUR State AL Zip Code 35603-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409742
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349199
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352379
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4647 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STECKEL, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 WINTHROP LN

City LAKE FOREST	State IL	Zip Code 60045-1373
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIREGENICS	Occupation (for Individual) CHEMIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
981.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368991

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STECKEL, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 WINTHROP LN

City LAKE FOREST	State IL	Zip Code 60045-1373
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIREGENICS	Occupation (for Individual) CHEMIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
981.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374712

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STECKEL, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 WINTHROP LN

City LAKE FOREST	State IL	Zip Code 60045-1373
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIREGENICS	Occupation (for Individual) CHEMIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
981.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.377494

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4648 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399356
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399548
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401201
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4649 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401393
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STECKEL, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 WINTHROP LN
 City LAKE FOREST State IL Zip Code 60045-1373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIREGENICS Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 981.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415394
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. STECKLEIN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13001 RIVER ROAD
 City POTOMAC State MD Zip Code 20854-1143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409604
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4650 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEDMAN, ELIZA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX
 City HOUSTON State TX Zip Code 77019-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391322
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STEEG, GEORGE, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20520 FALCONS LANDING CIRCLE 2405
 City POTOMAC FALLS State VA Zip Code 20165-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352005
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STEELE, T. GARRICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1888
 City MIDDLEBURG State VA Zip Code 20118-1888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CATAWBA CORPORATION Occupation (for Individual) RESTAURANT OPERATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358701
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4651 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFEK, HADEN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4508 MAHOGANY LN

City COPPER CANYON	State TX	Zip Code 75077-8547
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METROPOLITAN ANESTHESIA	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382416

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. STEFFEK, HADEN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4508 MAHOGANY LN

City COPPER CANYON	State TX	Zip Code 75077-8547
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METROPOLITAN ANESTHESIA	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382417

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STEFFEK, HADEN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4508 MAHOGANY LN

City COPPER CANYON	State TX	Zip Code 75077-8547
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METROPOLITAN ANESTHESIA	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386700

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4652 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFEK, HADEN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4508 MAHOGANY LN
 City COPPER CANYON State TX Zip Code 75077-8547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METROPOLITAN ANESTHESIA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391650
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEFFENS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 EDMUNTON DRIVE K4
 City NORTH BABYLON State NY Zip Code 11703-5230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BNP PARIBAS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388121
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEFFENS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 EDMUNTON DRIVE K4
 City NORTH BABYLON State NY Zip Code 11703-5230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BNP PARIBAS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388127
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4653 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFENS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 264 EDMUNTON DRIVE
 K4
 City NORTH BABYLON State NY Zip Code 11703-5230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BNP PARIBAS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388128
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349664
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352254
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4654 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFEN, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 798 ASHFIELD

City EDGEWOOD	State KY	Zip Code 41017-9680
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368969

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STEFFEN, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 798 ASHFIELD

City EDGEWOOD	State KY	Zip Code 41017-9680
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379875

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. STEFFEN, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 798 ASHFIELD

City EDGEWOOD	State KY	Zip Code 41017-9680
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AVION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.397773

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4655 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397774
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404319
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. STEFFEN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 798 ASHFIELD
 City EDGEWOOD State KY Zip Code 41017-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411703
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4656 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFES, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15908 KING ST.

City OVERLAND PARK	State KS	Zip Code 66221-6943
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2016

Transaction ID : SA11A.344541

Amount of Each Receipt this Period
32.00

Memo Item
CONTRIBUTION

B. STEFFES, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15908 KING ST.

City OVERLAND PARK	State KS	Zip Code 66221-6943
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365836

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. STEFFES, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15908 KING ST.

City OVERLAND PARK	State KS	Zip Code 66221-6943
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.380846

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	82.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4657 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEFFES, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15908 KING ST.
 City OVERLAND PARK State KS Zip Code 66221-6943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396731
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STEFFES, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15908 KING ST.
 City OVERLAND PARK State KS Zip Code 66221-6943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STEFFENS, TIFFANY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 CLERMONT AVENUE 1
 City BROOKLYN State NY Zip Code 11205-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAPINE GROUP Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419177
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4658 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEGMAN, ROBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 NICHOLS CIRCLE
 City FOLSOM State CA Zip Code 95630-9551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 16 / 2016**
Transaction ID : SA11A.349080
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STEGMAN, ROBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 NICHOLS CIRCLE
 City FOLSOM State CA Zip Code 95630-9551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.369077
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STEGMAN, ROBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 NICHOLS CIRCLE
 City FOLSOM State CA Zip Code 95630-9551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 16 / 2016**
Transaction ID : SA11A.398775
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4659 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEIN, AUDREY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2065 HIGHWAY A1A
 APT 1501
 City INDIAN HARBOUR BEA State FL Zip Code 32937-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381211
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. STEIN, AVY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 MAPLE HILL RD
 City GLENCOE State IL Zip Code 60022-1308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421206
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

C. STEIN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 PARSONS WAY
 City AVON State CT Zip Code 06001-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.359979
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4660 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEIN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 PARSONS WAY
 City AVON State CT Zip Code 06001-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409052
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEINKAMP, JANET, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 397 SUNDANCE DR
 City HEMPHILL State TX Zip Code 75948-6583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 641.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372395
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STEINKAMP, JANET, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 397 SUNDANCE DR
 City HEMPHILL State TX Zip Code 75948-6583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 641.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.393822
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4661 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEINKAMP, JANET, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 397 SUNDANCE DR
 City HEMPHILL State TX Zip Code 75948-6583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 641.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396684
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. STEINKAMP, JANET, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 397 SUNDANCE DR
 City HEMPHILL State TX Zip Code 75948-6583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 641.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403112
 Amount of Each Receipt this Period
 16.00
 Memo Item
 CONTRIBUTION

C. STEINKAMP, JANET, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 397 SUNDANCE DR
 City HEMPHILL State TX Zip Code 75948-6583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 641.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403181
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	166.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4662 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STEINER, LEONARD, M., MR., JR.

Mailing Address P.O. BOX 4872

City MANCHESTER State NH Zip Code 03108-4872

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEINER & CO. Occupation (for Individual) ECONOMIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016

Transaction ID : SA11A.371164

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STEINWACHS, PAUL, , ,

Mailing Address 420 MOULTONBOROUGH NECK RDD

City MOULTONBOROUGH State NH Zip Code 03254-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 06 / 2016

Transaction ID : SA11A.390126

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STEIN, RICHARD, , ,

Mailing Address 8385 JETT FERRY ROAD

City ATLANTA State GA Zip Code 30350-4739

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016

Transaction ID : SA11A.406491

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4663 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEINER, ROBERT, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 514
 City CHULA VISTA State CA Zip Code 91912-0514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360055
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. STEINER, ROBERT, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 514
 City CHULA VISTA State CA Zip Code 91912-0514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414548
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. STEINER, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 SHADOWCREEK CT
 City SIMPSONVILLE State SC Zip Code 29681-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349699
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4664 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEINER, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 SHADOWCREEK CT
 City SIMPSONVILLE State SC Zip Code 29681-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349704
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STEINER, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 SHADOWCREEK CT
 City SIMPSONVILLE State SC Zip Code 29681-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STEINER, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 SHADOWCREEK CT
 City SIMPSONVILLE State SC Zip Code 29681-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416311
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4665 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEINER, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 SHADOWCREEK CT
 City SIMPSONVILLE State SC Zip Code 29681-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416312
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

B. STELLOH, SARA MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 S 75TH ST
 City MILWAUKEE State WI Zip Code 53214-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) VOLUNTEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414900
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

C. STELLOH, SARA MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 S 75TH ST
 City MILWAUKEE State WI Zip Code 53214-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) VOLUNTEER
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414917
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4666 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STELLOH, SARA MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 S 75TH ST
 City MILWAUKEE State WI Zip Code 53214-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414920
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STELMACH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 W 100TH ST
 City KANSAS CITY State MO Zip Code 64114-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358312
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STELMACH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 W 100TH ST
 City KANSAS CITY State MO Zip Code 64114-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382472
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4667 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STELMACH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 W 100TH ST
 City KANSAS CITY State MO Zip Code 64114-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416185
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STEMMANN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2319 E MAIN STREET
 City NEW IBERIA State LA Zip Code 70560-4031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 23 / 2016**
Transaction ID : SA11A.377147
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. STEMLER, CARRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8191 STRAWBERRY LANE APT 320 320
 City FALLS CHURCH State VA Zip Code 22042-1047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 631.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368838
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4668 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEMLER, CARRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8191 STRAWBERRY LANE APT 320
 320
 City FALLS CHURCH State VA Zip Code 22042-1047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 631.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368851
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. STENDAHL, JOYCE, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9512 PARKWOOD COURT
 City FORT MYERS State FL Zip Code 33908-2859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.371027
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. STEPHENSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27671 DEPUTY CIR
 City LAGUNA HILLS State CA Zip Code 92653-7830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.374273
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4669 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPHENSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27671 DEPUTY CIR

City LAGUNA HILLS	State CA	Zip Code 92653-7830
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380466

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STEPHENSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27671 DEPUTY CIR

City LAGUNA HILLS	State CA	Zip Code 92653-7830
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380467

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. STEPHENSON, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27671 DEPUTY CIR

City LAGUNA HILLS	State CA	Zip Code 92653-7830
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398011

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4670 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STEPHENS, SUSAN, , ,

Mailing Address **6340 RIO BONITO DRIVE**

City **CARMICHAEL** State **CA** Zip Code **95608-5215**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **HOMEMAKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 02 / 2016

Transaction ID : SA11A.389012

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STEPHENSON, THOMAS, F., ,

Mailing Address **198 FAIR OAKS LANE**

City **ATHERTON** State **CA** Zip Code **94027-3032**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SEQUOIA CAPITAL** Occupation (for Individual) **LIMITED PARTNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
07 / 15 / 2016

Transaction ID : SA11A.346485

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STEPPE, STEPHEN, , ,

Mailing Address **54 SERRANO**

City **ATHERTON** State **CA** Zip Code **94027-3934**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **STOCKBRIDGE** Occupation (for Individual) **REAL ESTATE**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5250.00

Date of Receipt
07 / 19 / 2016

Transaction ID : SA11A.349347

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **11500.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4671 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPPE, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 SERRANO

City ATHERTON	State CA	Zip Code 94027-3934
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STOCKBRIDGE	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357536

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. STEPPE, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 SERRANO

City ATHERTON	State CA	Zip Code 94027-3934
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STOCKBRIDGE	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378885

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. STEPPE, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 SERRANO

City ATHERTON	State CA	Zip Code 94027-3934
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STOCKBRIDGE	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.385200

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4672 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPPE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 SERRANO
 City ATHERTON State CA Zip Code 94027-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STOCKBRIDGE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394118
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STEPPE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 SERRANO
 City ATHERTON State CA Zip Code 94027-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STOCKBRIDGE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413034
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. STERN, ELIZABETH, MAY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 FORT HILL RD
 City SCARSDALE State NY Zip Code 10583-2413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421209
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	26250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4673 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STERN, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23700 MALIBU COLONY RD
 City MALIBU State CA Zip Code 90265-6629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLINICAL SOCIAL WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 18800.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346980
 Amount of Each Receipt this Period 18800.00
 Memo Item CONTRIBUTION

B. STERN, MARC, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23700 MALIBU COLONY RD
 City MALIBU State CA Zip Code 90265-6629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE TCW GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6200.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346979
 Amount of Each Receipt this Period 6200.00
 Memo Item CONTRIBUTION

C. STERN, WALTER, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 5TH AVE 36TH FL
 City NEW YORK State NY Zip Code 10111-3600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421198
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 470425
 City FORT WORTH State TX Zip Code 76147-0425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WBW AGENT INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357331
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEVENS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 470425
 City FORT WORTH State TX Zip Code 76147-0425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WBW AGENT INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382288
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEVENS, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 450
 City SPRINGDALE State UT Zip Code 84767-0450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365913
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4675 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, DINAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MITO STREET
 City LADERA RANCH State CA Zip Code 92694-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394750
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. STEVENS, JAY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 SPYGLASS LANE
 City NAPLES State FL Zip Code 34102-7740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRKLAND && ELLIS LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.370908
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. STEVENSON, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64591 E CANYON SHADOWS LANE
 City SADDLEBROOKE State AZ Zip Code 85739-2027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.406896
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4676 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 DWIGHT ROAD
 City LONGMEADOW State MA Zip Code 01106-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394196
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEVENS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 DWIGHT ROAD
 City LONGMEADOW State MA Zip Code 01106-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394197
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEVENS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 DWIGHT ROAD
 City LONGMEADOW State MA Zip Code 01106-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394218
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4677 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 DWIGHT ROAD
 City LONGMEADOW State MA Zip Code 01106-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEVENS, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 DWIGHT ROAD
 City LONGMEADOW State MA Zip Code 01106-1889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER WILLIAMS REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416072
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEVENS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MITO STREET
 City LADERA RANCH State CA Zip Code 92694-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365936
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4678 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 W PASEO POTRERRO
 City GREEN VALLEY State AZ Zip Code 85622-3433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394916
 Amount of Each Receipt this Period 2.00
 Memo Item CONTRIBUTION

B. STEVENSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 W PASEO POTRERRO
 City GREEN VALLEY State AZ Zip Code 85622-3433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406541
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. STEVINSON, TERENCE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14744 W 32ND DR
 City GOLDEN State CO Zip Code 80401-1417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENVER WEST REALTY Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360328
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10202.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4679 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 4 BOX 646
 City MARBLE HILL State MO Zip Code 63764-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER/SPEAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399082
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. STEWART, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 4 BOX 646
 City MARBLE HILL State MO Zip Code 63764-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER/SPEAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399083
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. STEWART, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 4 BOX 646
 City MARBLE HILL State MO Zip Code 63764-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER/SPEAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399086
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

750.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4680 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 4 BOX 646
 City MARBLE HILL State MO Zip Code 63764-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER/SPEAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402278
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEWART, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 4 BOX 646
 City MARBLE HILL State MO Zip Code 63764-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER/SPEAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402280
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEWART, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 4 BOX 646
 City MARBLE HILL State MO Zip Code 63764-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WRITER/SPEAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410462
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4681 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7598CARAH DR
 City ST. FRANCISVILLE State LA Zip Code 70775-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEALTHCARE ADM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350388
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. STEWART, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7598CARAH DR
 City ST. FRANCISVILLE State LA Zip Code 70775-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEALTHCARE ADM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366912
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEWART, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7598CARAH DR
 City ST. FRANCISVILLE State LA Zip Code 70775-4737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEALTHCARE ADM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394565
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4682 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7598CARAH DR

City ST. FRANCISVILLE	State LA	Zip Code 70775-4737
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) HEALTHCARE ADM
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.404120

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STEWART, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 91-1068 WAIKAPOO ST

City EWA BEACH	State HI	Zip Code 96706-6463
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2016

Transaction ID : SA11A.364802

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. STEWART, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 91-1068 WAIKAPOO ST

City EWA BEACH	State HI	Zip Code 96706-6463
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : SA11A.386705

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4683 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91-1068 WAIKAPOO ST
 City EWA BEACH State HI Zip Code 96706-6463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2016
Transaction ID : SA11A.393710
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEWART, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 UPSWEPT LANE
 City S. BURLINGTON State VT Zip Code 05403-4441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396330
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEWART, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91-1068 WAIKAPOO ST
 City EWA BEACH State HI Zip Code 96706-6463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405915
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

300.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4684 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91-1068 WAIKAPOO ST
 City EWA BEACH State HI Zip Code 96706-6463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414877
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEWART, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 UPSWEPT LANE
 City S. BURLINGTON State VT Zip Code 05403-4441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417173
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. STEWART, LINDSAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 SOUTH WEST MONTGOMERY DR.
 City PORTLAND State OR Zip Code 97201-2436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.348189
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4685 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEWART, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4024 STEWART ROAD

City STEVENSON	State MD	Zip Code 21153-0680
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF MARYLAND	Occupation (for Individual) EXECUTIVE SERVICE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.388811

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. STEWART, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4024 STEWART ROAD

City STEVENSON	State MD	Zip Code 21153-0680
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF MARYLAND	Occupation (for Individual) EXECUTIVE SERVICE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419071

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. STIBOLT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1506 EBONY LANE

City HOUSTON	State TX	Zip Code 77018-5817
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIFEENERGY, LLC	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SA11A.372089

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4686 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STIENER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6905 LUTON HILL WAY
 City CLIFTON State VA Zip Code 20124-2613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379609
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STILES, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74 JEFFERSON ROAD
 City WHITEFIELD State NH Zip Code 03598-3108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.401640
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. STILLI, MARCO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 CHAPIN ST NW 301
 City WASHINGTON State DC Zip Code 20009-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357545
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4687 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STILLI, MARCO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 CHAPIN ST NW
 301
 City WASHINGTON State DC Zip Code 20009-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382716
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. STILLI, MARCO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 CHAPIN ST NW
 301
 City WASHINGTON State DC Zip Code 20009-8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413071
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. STIMPSON, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 E 87ST
 30A
 City NEW YORK State NY Zip Code 10128-1136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OUTFRONT MEDIA Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386980
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4688 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STINSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 KELLY MILL ROAD
 City CUMMING State GA Zip Code 30040-7199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AS-TECH ENGINEERING CO. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390841
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STINSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 KELLY MILL ROAD
 City CUMMING State GA Zip Code 30040-7199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AS-TECH ENGINEERING CO. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390842
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STINSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 KELLY MILL ROAD
 City CUMMING State GA Zip Code 30040-7199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AS-TECH ENGINEERING CO. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4689 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STINSON, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1775 KELLY MILL ROAD

City CUMMING	State GA	Zip Code 30040-7199
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AS-TECH ENGINEERING CO.	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.409861

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STIRLING, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7376 GRASSY CREEK WAY

City EL DORADO HILLS	State CA	Zip Code 95762-5032
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.354056

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. STIRLING, JAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7376 GRASSY CREEK WAY

City EL DORADO HILLS	State CA	Zip Code 95762-5032
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380528

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4690 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STIRLING, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7376 GRASSY CREEK WAY
 City EL DORADO HILLS State CA Zip Code 95762-5032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380542
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STIVERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5935 OLD LODGE DR
 City HOUSTON State TX Zip Code 77066-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356172
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STIVERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5935 OLD LODGE DR
 City HOUSTON State TX Zip Code 77066-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.399024
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4691 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOCK, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4870 SNOW HILL RD
 City SALISBURY State MD Zip Code 21804-1944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357559
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. STOKES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4014 DUPLIN DR
 City GREENSBORO State NC Zip Code 27407-7763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348599
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STOKES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4014 DUPLIN DR
 City GREENSBORO State NC Zip Code 27407-7763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372714
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4692 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOKES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4014 DUPLIN DR
 City GREENSBORO State NC Zip Code 27407-7763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399884
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STOKES, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4014 DUPLIN DR
 City GREENSBORO State NC Zip Code 27407-7763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423155
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STOKES, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5380 SILTSTONE WAY
 City SPARKS State NV Zip Code 89436-8101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW HOPE CHRISTIAN FELLOWSHIP Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370522
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4693 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOKES, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5380 SILTSTONE WAY
 City SPARKS State NV Zip Code 89436-8101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW HOPE CHRISTIAN FELLOWSHIP PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403036
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. STOKES, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5380 SILTSTONE WAY
 City SPARKS State NV Zip Code 89436-8101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW HOPE CHRISTIAN FELLOWSHIP PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403056
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. STOLL, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 N ELMWOOD
 City TRAVERSE CITY State MI Zip Code 49684-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 UTILITY REDUCTION OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387472
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4694 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOLOSKI, WILLIAM, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 GREY WING POINT
 City NAPLES State FL Zip Code 34113-8404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392427
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. STONE, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 W. MANSFIELD AVE 67
 City DENVER State CO Zip Code 80235-3032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353679
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STONE, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 W. MANSFIELD AVE 67
 City DENVER State CO Zip Code 80235-3032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399988
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4695 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, ALLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6300 W. MANSFIELD AVE
67

City DENVER State CO Zip Code 80235-3032

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407611

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STONE, ALLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6300 W. MANSFIELD AVE
67

City DENVER State CO Zip Code 80235-3032

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407612

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STONE, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 OCEAN RIDGE COURT

City PONTE VEDRA BEACH State FL Zip Code 32082-3400

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.389524

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4696 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386320
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386329
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STONE, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 BRIDGE STREET
 City CHATHAM State MA Zip Code 02633-2509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386331
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4697 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, MARTHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 BRIDGE STREET

City CHATHAM	State MA	Zip Code 02633-2509
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419466

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STONE, REAGAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3227 OCEAN DRIVE

City CORPUS CHRISTI	State TX	Zip Code 78404-1616
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARM/RANCH
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386018

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. STONE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1072 288TH AVE.

City BURLINGTON	State WI	Zip Code 53105-9304
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) APPLE FARMER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.349365

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4698 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1072 288TH AVE.
 City BURLINGTON State WI Zip Code 53105-9304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) APPLE FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380226
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344474
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

C. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348783
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 382.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4699 OF 5722
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOOPS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1222 STONECREST DR.

City HOUSTON	State TX	Zip Code 77018-7414
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1442.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348805

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. STOOPS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1222 STONECREST DR.

City HOUSTON	State TX	Zip Code 77018-7414
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1442.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355558

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. STOOPS, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1222 STONECREST DR.

City HOUSTON	State TX	Zip Code 77018-7414
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1442.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358412

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358413
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370319
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372587
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4701 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372731
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391048
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394015
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4702 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394018
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399913
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401337
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4703 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.409055
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STOOPS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 STONECREST DR.
 City HOUSTON State TX Zip Code 77018-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411367
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. STORK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5433 WHITE IBIS DR
 City NORTH PORT State FL Zip Code 34287-2396
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358955
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4704 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STORK, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5433 WHITE IBIS DR

City NORTH PORT	State FL	Zip Code 34287-2396
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2016

Transaction ID : SA11A.403247

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. STOTT, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1328 LAKE WORTH LANE

City NORTH PALM BEACH	State FL	Zip Code 33408-2905
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2016

Transaction ID : SA11A.345220

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. STOULIL, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 CRYSTAL SPRINGS DR NE

City BAINBRIDGE ISLAND	State WA	Zip Code 98110-2070
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMENITY SERVICES	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

Transaction ID : SA11A.352334

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4705 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOULIL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3180 CRYSTAL SPRINGS DR NE
 City BAINBRIDGE ISLAND State WA Zip Code 98110-2070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMENITY SERVICES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375899
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STOULIL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3180 CRYSTAL SPRINGS DR NE
 City BAINBRIDGE ISLAND State WA Zip Code 98110-2070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMENITY SERVICES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401490
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STOVER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 DEERING BAY CT
 City GIBSONIA State PA Zip Code 15044-8043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359789
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4706 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STOWERS, JOEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 CEDAR SPRINGS DRIVE
 City ATHENS State GA Zip Code 30605-3489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 07 / 2016**
Transaction ID : SA11A.345785
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STOWERS, JOEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 CEDAR SPRINGS DRIVE
 City ATHENS State GA Zip Code 30605-3489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.371094
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. STRAATSMA, BRADLEY, R., DR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3031 ELVIDO DRIVE
 City LOS ANGELES State CA Zip Code 90049-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417274
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4707 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRADLING, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6498 WESTOVER CIRCLE
 City CINCINNATI State OH Zip Code 45236-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.370976
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. STRAHLENDORF, PATTIE, S., MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CALLANDER WAY APT 355
 City FOLSOM State CA Zip Code 95630-6101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.349764
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. STRAHLENDORF, PATTIE, S., MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 CALLANDER WAY APT 355
 City FOLSOM State CA Zip Code 95630-6101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.349765
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4708 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRAHLENDORF, PATTIE, S., MRS.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 CALLANDER WAY
APT 355

City FOLSOM State CA Zip Code 95630-6101

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.423135

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. STRAHLENDORF, PATTIE, S., MRS.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 CALLANDER WAY
APT 355

City FOLSOM State CA Zip Code 95630-6101

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.423138

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. STRANG, DAVID, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7297 VILLAGE DR.

City MASON State OH Zip Code 45040-1409

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
07 / 26 / 2016
Transaction ID : SA11A.355273

Amount of Each Receipt this Period
15.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4709 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRANG, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7297 VILLAGE DR.
 City MASON State OH Zip Code 45040-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383701
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. STRANG, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7297 VILLAGE DR.
 City MASON State OH Zip Code 45040-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398801
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. STRANG, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7297 VILLAGE DR.
 City MASON State OH Zip Code 45040-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399392
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4710 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRANG, DAVID, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7297 VILLAGE DR.

City MASON	State OH	Zip Code 45040-1409
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.404166

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. STRATA, RAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 9106

City NORWOOD	State MA	Zip Code 02062-9106
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SANTA VENTURE PARTNERS	Occupation (for Individual) DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.348123

Amount of Each Receipt this Period
10400.00

Memo Item
CONTRIBUTION

C. STRATEGOS POLIS, STEPHANIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5145 TILDEN STREET NW

City WASHINGTON	State DC	Zip Code 20016-1961
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOYS & GIRLS CLUBS OF AMERICA	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412458

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4711 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRAUS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 446 CANTERBURY HILL STREET

City SAN ANTONIO	State TX	Zip Code 78209-2814
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2016

Transaction ID : SA11A.361383

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. STRAUCH, ELAINE, B., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4327 S YOSEMITE COURT

City GREENWOOD VILLAGE	State CO	Zip Code 80111-1228
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2016

Transaction ID : SA11A.366375

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. STRAUS, JOCELYN, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 CANYON DRIVE

City SAN ANTONIO	State TX	Zip Code 78209-3604
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
795.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2016

Transaction ID : SA11A.348331

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	770.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4712 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRAUS, JOCELYN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 CANYON DRIVE
 City SAN ANTONIO State TX Zip Code 78209-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 795.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.348332
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STRAWHECKER, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1236 S 113TH PLAZA
 City OMAHA State NE Zip Code 68144-1880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOVIDA CONSULTING Occupation (for Individual) CONSULTATNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372855
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STRAWHECKER, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1236 S 113TH PLAZA
 City OMAHA State NE Zip Code 68144-1880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOVIDA CONSULTING Occupation (for Individual) CONSULTATNT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372856
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4713 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRAW, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1913 HACKBERRY RD.
 City BLOOMINGTON State IL Zip Code 61704-2779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348755
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STRAW, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1913 HACKBERRY RD.
 City BLOOMINGTON State IL Zip Code 61704-2779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348781
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STREETMAN, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 LAKE RENA DRIVE
 City LONGWOOD State FL Zip Code 32779-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400395
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4714 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRETCHER, OLYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CINDER CREEK RD.
 City SPARTANBURG State SC Zip Code 29307-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355416
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STRETCHER, OLYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CINDER CREEK RD.
 City SPARTANBURG State SC Zip Code 29307-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355418
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STRETCHER, OLYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CINDER CREEK RD.
 City SPARTANBURG State SC Zip Code 29307-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373045
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4715 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRETCHER, OLYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CINDER CREEK RD.
 City SPARTANBURG State SC Zip Code 29307-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.373046
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STRETCHER, OLYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 CINDER CREEK RD.
 City SPARTANBURG State SC Zip Code 29307-2704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.418247
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.351000
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4716 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372361
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383882
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.384979
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4717 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRICKLAND, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 19307
 City JONESBORO State AR Zip Code 72403-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365670
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. STRICKLAND, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 19307
 City JONESBORO State AR Zip Code 72403-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386327
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. STRICKLAND, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 19307
 City JONESBORO State AR Zip Code 72403-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386328
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4718 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRICKLAND, SETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 STANWICH LANE

City GREENWICH	State CT	Zip Code 06830-4839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONITOR CAPITAL INVESTMENTS	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392495

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. STRITE, L., C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5411 KEYSTONE ROAD

City RICHMOND	State IL	Zip Code 60071-9474
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.369360

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STRITE, L., C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5411 KEYSTONE ROAD

City RICHMOND	State IL	Zip Code 60071-9474
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.411870

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4719 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STROBEL, JACQUELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address HC 1 BOX 3021

City JOSHUA TREE	State CA	Zip Code 92252-9802
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.383502

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. STROBRIDGE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 60 LOCK ST. UNIT - C
C

City NASHUA	State NH	Zip Code 03064-2476
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFIZER	Occupation (for Individual) BIO-PHARMA MECHANIC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 29 / 2016
Transaction ID : SA11A.384991

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. STROBRIDGE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 60 LOCK ST. UNIT - C
C

City NASHUA	State NH	Zip Code 03064-2476
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFIZER	Occupation (for Individual) BIO-PHARMA MECHANIC
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 22 / 2016
Transaction ID : SA11A.403904

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4720 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STROBRIDGE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 LOCK ST. UNIT - C
C

City NASHUA State NH Zip Code 03064-2476

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) PFIZER Occupation (for Individual) BIO-PHARMA MECHANIC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11A.403954

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STROBRIDGE, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 LOCK ST. UNIT - C
C

City NASHUA State NH Zip Code 03064-2476

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) PFIZER Occupation (for Individual) BIO-PHARMA MECHANIC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2016

Transaction ID : SA11A.413065

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. STROHL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15925 SAN CLEMENTE DRIVE

City EDMOND State OK Zip Code 73013-

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2016

Transaction ID : SA11A.348475

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 195.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4721 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STROHL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15925 SAN CLEMENTE DRIVE
 City EDMOND State OK Zip Code 73013-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348480
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. STROHL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15925 SAN CLEMENTE DRIVE
 City EDMOND State OK Zip Code 73013-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353470
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. STROHL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15925 SAN CLEMENTE DRIVE
 City EDMOND State OK Zip Code 73013-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355259
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4722 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STROHL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15925 SAN CLEMENTE DRIVE
 City EDMOND State OK Zip Code 73013-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368540
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. STROHL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15925 SAN CLEMENTE DRIVE
 City EDMOND State OK Zip Code 73013-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385833
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. STROHL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15925 SAN CLEMENTE DRIVE
 City EDMOND State OK Zip Code 73013-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409123
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4723 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STROHL, KAREN, , ,

Mailing Address 15925 SAN CLEMENTE DRIVE

City EDMOND State OK Zip Code 73013-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11A.418396

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STRONG, GEORGE, , ,

Mailing Address 5455 CASTLE KNOLL ROAD

City LA CANADA State CA Zip Code 91011-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CORNERSTONE RESEARCH Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016

Transaction ID : SA11A.379011

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STRONG, GEORGE, , ,

Mailing Address 5455 CASTLE KNOLL ROAD

City LA CANADA State CA Zip Code 91011-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CORNERSTONE RESEARCH Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016

Transaction ID : SA11A.409013

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 520.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4724 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRONG, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4117 CLEVELAND PL
 City METAIRIE State LA Zip Code 70003-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.382660
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STRONG, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4117 CLEVELAND PL
 City METAIRIE State LA Zip Code 70003-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418656
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. STRONG, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4025 13TH AVE W
 City SEATTLE State WA Zip Code 98119-1350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COASTAL TRANSPORTATION Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.367979
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4725 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRONG, PETER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4025 13TH AVE W

City SEATTLE	State WA	Zip Code 98119-1350
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COASTAL TRANSPORTATION	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.367980

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. STROPKI, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32620 SHADWOBROOK DRIVE

City SOLON	State OH	Zip Code 44139-1374
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.348164

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. STROTTMAN, BARBARA, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 HARBOR ISLAND RD

City NEWPORT BEACH	State CA	Zip Code 92660-7204
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

Transaction ID : SA11A.347220

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4726 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRUVE, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 LEXINGTON AVENUE
 ROOM 3032
 City NEW YORK State NY Zip Code 10017-3904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.387005
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. STRUVE, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 LEXINGTON AVENUE
 ROOM 3032
 City NEW YORK State NY Zip Code 10017-3904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412419
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. STUART, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7448 E MCLELLAN LANE
 City SCOTTSDALE State AZ Zip Code 85250-4641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366307
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4727 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUCKY, JAY, R., DR., D.D.S.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3005 SIERRA PKWY
 City HUTCHINSON State KS Zip Code 67502-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357456
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. STUCKY, JAY, R., DR., D.D.S.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3005 SIERRA PKWY
 City HUTCHINSON State KS Zip Code 67502-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.362282
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. STUCKY, JAY, R., DR., D.D.S.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3005 SIERRA PKWY
 City HUTCHINSON State KS Zip Code 67502-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368567
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4728 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUCKY, JAY, R., DR., D.D.S.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3005 SIERRA PKWY
 City HUTCHINSON State KS Zip Code 67502-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382705
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. STUCKY, JAY, R., DR., D.D.S.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3005 SIERRA PKWY
 City HUTCHINSON State KS Zip Code 67502-2972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398679
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STUCKEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18468 E 600 NORTH RD
 City BLOOMINGTON State IL Zip Code 61705-5778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379848
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4729 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUCKEY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18468 E 600 NORTH RD

City BLOOMINGTON	State IL	Zip Code 61705-5778
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405011

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STULTZ, MARY, N., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 DEERFIELD CIRCLE

City KINGWOOD	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.361149

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. STULTZ, MARY, N., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 DEERFIELD CIRCLE

City KINGWOOD	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381179

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4730 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUMP, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21145 CARDINAL POND TERRACE

City ASHBURN	State VA	Zip Code 20147-6129
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2016

Transaction ID : SA11A.360054

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. STUMP, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21145 CARDINAL POND TERRACE

City ASHBURN	State VA	Zip Code 20147-6129
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381537

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STUNZ, GENE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 560 S WERNER LANE

City MERIDIAN	State ID	Zip Code 83642-3173
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11A.354942

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4731 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STUNZ, GENE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 S WERNER LANE
 City MERIDIAN State ID Zip Code 83642-3173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365265
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STUPFEL, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 COMMERCE 1900
 City FT WORTH State TX Zip Code 76102-4140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KLEINHEINZ CAPITAL PARTNERS Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404022
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. STURDIVANT, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 W. 5TH ST. STE. 1100 STE 1100
 City TULSA State OK Zip Code 74103-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GABLEGOTWALS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362002
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4732 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STURDIVANT, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 W. 5TH ST. STE. 1100
 STE 1100
 City TULSA State OK Zip Code 74103-4217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GABLEGOTWALS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410848
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STURDEVANT, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 W. PALMER BEND
 City THE WOODLANDS State TX Zip Code 77381-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387461
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STURDEVANT, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 W. PALMER BEND
 City THE WOODLANDS State TX Zip Code 77381-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400708
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4733 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STURGEON, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28042 AVENUE STANFORD UNIT E
 City SANTA CLARITA State CA Zip Code 91355-1157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONFIDENTIAL DATA DESTRUCTION CO. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348911
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. STURGEON, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28042 AVENUE STANFORD UNIT E
 City SANTA CLARITA State CA Zip Code 91355-1157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONFIDENTIAL DATA DESTRUCTION CO. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 13 / 2016**
Transaction ID : SA11A.366826
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STURMAN, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 MILL RIVER OAD
 City FAIRFIELD State CT Zip Code 06824-2958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 02 / 2016**
Transaction ID : SA11A.388920
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4734 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUAREZ, RAMON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 N ISLAND DRIVE
 City ATLANTA State GA Zip Code 30327-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358567
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SUCI, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 643 LOCHMOOR BLVD.
 City GROSE POINTE WOOD State MI Zip Code 48236-1751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AKEBONO BRAKE Occupation (for Individual) SALES DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387347
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SUDDERTH, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4076 COMANCHE TRACE DRIVE
 City KERRVILLE State TX Zip Code 78028-8240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377831
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4735 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SUDDERTH, BETTY, , ,

Mailing Address 4076 COMANCHE TRACE DRIVE

City KERRVILLE	State TX	Zip Code 78028-8240
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403702

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SUDDERTH, BETTY, , ,

Mailing Address 4076 COMANCHE TRACE DRIVE

City KERRVILLE	State TX	Zip Code 78028-8240
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403706

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SUFFIELD, LAURA, , ,

Mailing Address 1001 NANTUCKET DR.
UNIT 5

City HOUSTON	State TX	Zip Code 77057-1980
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
994.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358099

Amount of Each Receipt this Period
247.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	397.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4736 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUFFIELD, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NANTUCKET DR.
 UNIT 5
 City HOUSTON State TX Zip Code 77057-1980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 994.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358103
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SUFFIELD, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 NANTUCKET DR.
 UNIT 5
 City HOUSTON State TX Zip Code 77057-1980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 994.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408217
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

C. SUGRUE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 CARMEL PL
 City MABANK State TX Zip Code 75156-6014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11A.398484
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	997.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4737 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUH, BYOUNG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 LIVERY COURT
 City OAK BROOK State IL Zip Code 60523-2593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BISCO INC Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392608
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SULC, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24HARBOR RIVER CIRCLE
 City ST. HELENA ISLAND State SC Zip Code 29920-4716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348726
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SULC, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24HARBOR RIVER CIRCLE
 City ST. HELENA ISLAND State SC Zip Code 29920-4716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362476
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4738 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SULLIVAN, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4441 86TH AVE SE
 City MERCER ISLAND State WA Zip Code 98040-4145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404023
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SULLIVAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SARAH SANFORD RD. EAST/P.O. BOX
 City BRIDGEWATER State CT Zip Code 06752-0304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420338
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SULLIVAN, TIMOTHY, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5330 WINGFOOT DRIVE
 City BAKERSFIELD State CA Zip Code 93306-3163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SULLIVAN PETROLEUM CO. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381486
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4739 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUMMERS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 HIDDEN POND DRIVE
 City DOYLESTOWN State OH Zip Code 44230-1683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358398
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SUMMERS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 HIDDEN POND DRIVE
 City DOYLESTOWN State OH Zip Code 44230-1683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382499
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SUMMERS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 HIDDEN POND DRIVE
 City DOYLESTOWN State OH Zip Code 44230-1683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390891
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4740 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUMNER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BAYOU SHADOWS STREET
 City HOUSTON State TX Zip Code 77024-6227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLPOINTE SURVEY CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.370913
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SUNDEEN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 OAK MEADOW DR A
 City LOS GATOS State CA Zip Code 95032-4458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355419
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SUNDEEN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 OAK MEADOW DR A
 City LOS GATOS State CA Zip Code 95032-4458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383723
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4741 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUNDEEN, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 OAK MEADOW DR
 City LOS GATOS State CA Zip Code 95032-4458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RE ESTATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403006
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SURBER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3281 PRESTON SHORE DR
 City HARRISONBURG State VA Zip Code 22801-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) STOCKBROKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372315
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SURBER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3281 PRESTON SHORE DR
 City HARRISONBURG State VA Zip Code 22801-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) STOCKBROKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399977
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4742 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SURLAS, JEFFREY, R., ,			Date of Receipt MM / DD / YYYY 08 / 05 / 2016 Transaction ID : SA11A.362960		
Mailing Address 2004 10TH STREET			Amount of Each Receipt this Period 250.00		
City MONROE	State WI	Zip Code 53566-1834	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) COLONY BRANDS		Occupation (for Individual) ATTORNEY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SURLAS, JEFFREY, R., ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016 Transaction ID : SA11A.417682		
Mailing Address 2004 10TH STREET			Amount of Each Receipt this Period 250.00		
City MONROE	State WI	Zip Code 53566-1834	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) COLONY BRANDS		Occupation (for Individual) ATTORNEY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SUSSMAN, ADAM, J., ,			Date of Receipt MM / DD / YYYY 08 / 17 / 2016 Transaction ID : SA11A.367940		
Mailing Address			Amount of Each Receipt this Period 5000.00		
City	State	Zip Code	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00			

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4743 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUTLIFF, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 1307**
 City **HARRISBURG** State **PA** Zip Code **17105-1307**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SUTLIFF CHEVROLET CO.** Occupation (for Individual) **AUTO DEALER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **6000.00**

Date of Receipt **07 / 06 / 2016**
Transaction ID : SA11A.345912
 Amount of Each Receipt this Period **5000.00**
 Memo Item CONTRIBUTION

B. SUTLIFF, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **BOX 1307**
 City **HARRISBURG** State **PA** Zip Code **17105-1307**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SUTLIFF CHEVROLET CO.** Occupation (for Individual) **AUTO DEALER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **6000.00**

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374203
 Amount of Each Receipt this Period **1000.00**
 Memo Item CONTRIBUTION

C. SUTTLE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **716 MONTGOMERY DRIVE**
 City **BIRMINGHAM** State **AL** Zip Code **35213-2504**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **297.00**

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397639
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4744 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUTTLE, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 716 MONTGOMERY DRIVE
City BIRMINGHAM State AL Zip Code 35213-2504
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 297.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407646
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SUTTON, GRACE, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1185 PARK AVENUE 15G
City NEW YORK State NY Zip Code 10128-1312
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359486
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SUTTON, GRACE, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1185 PARK AVENUE 15G
City NEW YORK State NY Zip Code 10128-1312
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379745
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4745 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUTTON, GRACE, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1185 PARK AVENUE
15G

City NEW YORK State NY Zip Code 10128-1312

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403530

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

B. SUTTON, GRACE, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1185 PARK AVENUE
15G

City NEW YORK State NY Zip Code 10128-1312

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403535

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. SVEINSSON, HJALMAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7101 BAY FRONT DRIVE
300

City ANNAPOLIS State MD Zip Code 21403-3622

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.378999

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4746 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SWAGER, EUGENE, C., MR.,

Mailing Address **6901 N GALENA ROAD, APT 117**
APT. 117

City **PEORIA** State **IL** Zip Code **61614-3158**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
08 / 10 / 2016

Transaction ID : SA11A.364201

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SWAIN, JACK, , ,

Mailing Address **1 5TH AVENUE**
APT. 16F

City **NEW YORK** State **NY** Zip Code **10003-4317**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KS CAPITAL LP** Occupation (for Individual) **INVESTMENTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.417364

Amount of Each Receipt this Period
2700.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SWALM, STEPHEN, P., ,

Mailing Address **7645 S GRAPE WAY**

City **CENTENNIAL** State **CO** Zip Code **80122-3861**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BES**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 20 / 2016

Transaction ID : SA11A.400422

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3400.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4747 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SWAN, CHERI, , ,			Date of Receipt MM / DD / YYYY 07 / 20 / 2016		
Mailing Address 895 BROWNS DR			Transaction ID : SA11A.352662		
City EASTON	State PA	Zip Code 18042-9454	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) CUSTOM PROGRAMS INC		Occupation (for Individual) PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SWAN, CHERI, , ,			Date of Receipt MM / DD / YYYY 08 / 11 / 2016		
Mailing Address 895 BROWNS DR			Transaction ID : SA11A.364934		
City EASTON	State PA	Zip Code 18042-9454	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) CUSTOM PROGRAMS INC		Occupation (for Individual) PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SWAN, CHERI, , ,			Date of Receipt MM / DD / YYYY 08 / 20 / 2016		
Mailing Address 895 BROWNS DR			Transaction ID : SA11A.376122		
City EASTON	State PA	Zip Code 18042-9454	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer (for Individual) CUSTOM PROGRAMS INC		Occupation (for Individual) PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4748 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWAN, CHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 BROWNS DR
 City EASTON State PA Zip Code 18042-9454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSTOM PROGRAMS INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2016
Transaction ID : SA11A.393672
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372166
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390201
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4749 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE
 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390216
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE
 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390219
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE
 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403130
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4750 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403133
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403177
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403183
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4751 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE
 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403184
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. SWAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 6TH AVE
 34
 City CLARKSTON State WA Zip Code 99403-1563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407488
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. SWANK, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4166 TRAVIS COUNTRY CIR
 City AUSTIN State TX Zip Code 78735-6337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEECH LANGUAGE PATHOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 04 / 2016
Transaction ID : SA11A.344204
 Amount of Each Receipt this Period
 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4752 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWANK, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4166 TRAVIS COUNTRY CIR
 City AUSTIN State TX Zip Code 78735-6337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEECH LANGUAGE PATHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362445
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. SWANK, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4166 TRAVIS COUNTRY CIR
 City AUSTIN State TX Zip Code 78735-6337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEECH LANGUAGE PATHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363547
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. SWANK, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4166 TRAVIS COUNTRY CIR
 City AUSTIN State TX Zip Code 78735-6337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SPEECH LANGUAGE PATHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386219
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4753 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWANK, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4166 TRAVIS COUNTRY CIR

City AUSTIN	State TX	Zip Code 78735-6337
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SPEECH LANGUAGE PATHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2016

Transaction ID : SA11A.389176

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

B. SWANK, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4166 TRAVIS COUNTRY CIR

City AUSTIN	State TX	Zip Code 78735-6337
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SPEECH LANGUAGE PATHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403847

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SWANK, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4166 TRAVIS COUNTRY CIR

City AUSTIN	State TX	Zip Code 78735-6337
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SPEECH LANGUAGE PATHOLOGIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411186

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4754 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWANSON, D., A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7984 CARUTH COURT
 City DALLAS State TX Zip Code 75225-8135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417047
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SWANSON, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1551 SAINT JAMES CIRCLE
 City THE VILLAGES State FL Zip Code 32162-7648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358903
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. SWANSON, STEVEN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1068 SE BELLE AIRE DR
 City GRANTS PASS State OR Zip Code 97526-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWANSON GROUP INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367899
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4755 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 MAULSBY LANE
 City EVERETT State WA Zip Code 98201-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEATTLE GYMNASTICS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384021
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SWEENEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 MAULSBY LANE
 City EVERETT State WA Zip Code 98201-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEATTLE GYMNASTICS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419475
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SWEEZEY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DEER LN
 City MANORVILLE State NY Zip Code 11949-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMPSITE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384613
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4756 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEEZEY, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 DEER LN

City MANORVILLE	State NY	Zip Code 11949-2944
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAMPSITE	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384644

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SWEEZEY, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 DEER LN

City MANORVILLE	State NY	Zip Code 11949-2944
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAMPSITE	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415819

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. SWEN, WEN, PEI, REV.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14720 35TH AVENUE
APT 9A

City FLUSHING	State NY	Zip Code 11354-3706
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NY LING LIANG CHURCH	Occupation (for Individual) PASTOR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.348089

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4757 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEN, WEN, PEI, REV.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14720 35TH AVENUE
 APT 9A
 City FLUSHING State NY Zip Code 11354-3706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NY LING LIANG CHURCH Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364460
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SWEN, WEN, PEI, REV.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14720 35TH AVENUE
 APT 9A
 City FLUSHING State NY Zip Code 11354-3706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NY LING LIANG CHURCH Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406934
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SWENSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 BRAKEFIELD DRIVE
 City JANESVILLE State WI Zip Code 53546-2241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385216
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4758 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWICKLEY, SHIRLEY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 HILLVIEW DRIVE
 APT 221
 City PENSACOLA State FL Zip Code 32514-5455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384414
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SWIFT, CHARLOTTE, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 CARA DRIVE
 City NANUET State NY Zip Code 10954-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355745
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SWIFT, CHARLOTTE, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 CARA DRIVE
 City NANUET State NY Zip Code 10954-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380714
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4759 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SWIFT, CHARLOTTE, G., MRS.,

Mailing Address 30 CARA DRIVE

City NANUET State NY Zip Code 10954-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONTALBANO, CONDON & FRANK, P.C. Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407998

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SWIFT, JIM, , ,

Mailing Address 425 DOCKSIDE DR. UNIT 1005

City NAPLES State FL Zip Code 34110-3659

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410168

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SWINDELLS, CHARLES, J., ,

Mailing Address 500 NW HILLTOP RD

City PORTLAND State OR Zip Code 97210-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.360325

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3050.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4760 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWINEHART, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 NORTH PERRY PARKWAY

City OREGON	State WI	Zip Code 53575-3324
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METALCRAFT IND. INC.	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016

Transaction ID : SA11A.379824

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SWINGLE, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2228 MESCALERO AVENUE

City GRAND JUNCTION	State CO	Zip Code 81507-2593
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.389509

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. SWING, WILLIAM, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 GRANITE RIDGE ROAD

City CHAPEL HILL	State NC	Zip Code 27516-8617
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2016

Transaction ID : SA11A.353371

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4761 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWING, WILLIAM, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 GRANITE RIDGE ROAD
 City CHAPEL HILL State NC Zip Code 27516-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398887
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SWING, WILLIAM, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 GRANITE RIDGE ROAD
 City CHAPEL HILL State NC Zip Code 27516-8617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398891
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SWIONTEK, MICHAEL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8728 MCCARTY RANCH DRIVE
 City SAN JOSE State CA Zip Code 95135-2156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370797
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4762 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344424
 Amount of Each Receipt this Period 32.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345863
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.347549
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 82.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4763 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.348252
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348823
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348841
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4764 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 16 / 2016
Transaction ID : SA11A.349071
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349667
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350466
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4765 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353743
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355446
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358271
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4766 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370008
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372723
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378770
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4767 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 MILL POND LN

City NEW ROCHELLE	State NY	Zip Code 10805-2128
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1865.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378772

Amount of Each Receipt this Period
15.00

Memo Item
CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 MILL POND LN

City NEW ROCHELLE	State NY	Zip Code 10805-2128
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1865.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378776

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 MILL POND LN

City NEW ROCHELLE	State NY	Zip Code 10805-2128
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1865.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384224

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4768 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384408
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386832
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390681
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4769 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394535
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398346
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399502
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4770 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399955
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400465
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SWIRE, JAMES, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 MILL POND LN
 City NEW ROCHELLE State NY Zip Code 10805-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1865.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400817
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4771 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWIRE, JAMES, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 MILL POND LN

City NEW ROCHELLE	State NY	Zip Code 10805-2128
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1865.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.404283

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. SWOBODA, JULIET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3213 DIANORA DRIVE

City RANCHO PALOS VERDE	State CA	Zip Code 90275-6267
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 13 / 2016

Transaction ID : SA11A.347636

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

C. SWOBODA, JULIET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3213 DIANORA DRIVE

City RANCHO PALOS VERDE	State CA	Zip Code 90275-6267
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016

Transaction ID : SA11A.366680

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4772 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWOBODA, JULIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3213 DIANORA DRIVE
 City RANCHO PALOS VERDE State CA Zip Code 90275-6267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400002
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SWOBODA, JULIET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3213 DIANORA DRIVE
 City RANCHO PALOS VERDE State CA Zip Code 90275-6267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400003
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SWOPE, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 CHURCH STREET
 City WOODS HOLE State MA Zip Code 02543-1036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406621
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4773 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SYDOW, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3112 VICTORIA AVE
 City CINCINNATI State OH Zip Code 45208-1654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410161
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. SYDOW, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3112 VICTORIA AVE
 City CINCINNATI State OH Zip Code 45208-1654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410164
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SYKES, GENE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1827 WESTRIDGE RD
 City LOS ANGELES State CA Zip Code 90049-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 07 / 14 / 2016
Transaction ID : SA11A.346110
 Amount of Each Receipt this Period 12500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 13000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4774 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SYKES, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 PHILLIPS MILL RD
 City WEST GROVE State PA Zip Code 19390-9165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) VETERINARIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353433
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. SYKES, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 PHILLIPS MILL RD
 City WEST GROVE State PA Zip Code 19390-9165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) VETERINARIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353437
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SYKES, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 PHILLIPS MILL RD
 City WEST GROVE State PA Zip Code 19390-9165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) VETERINARIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366580
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4775 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SZEGLIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 PARK AVENUE

City BLUE POINT	State NY	Zip Code 11715-1040
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2016

Transaction ID : SA11A.349832

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. SZEGLIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 PARK AVENUE

City BLUE POINT	State NY	Zip Code 11715-1040
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.370543

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SZEGLIN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 PARK AVENUE

City BLUE POINT	State NY	Zip Code 11715-1040
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2016

Transaction ID : SA11A.400268

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4776 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SZEGLIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 PARK AVENUE
 City BLUE POINT State NY Zip Code 11715-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418423
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SZEGLIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 PARK AVENUE
 City BLUE POINT State NY Zip Code 11715-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418426
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SZYMANSKA, BASHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 183 GREAT HILL RD.
 City RIDGEFIELD State CT Zip Code 06877-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357246
 Amount of Each Receipt this Period 180.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4777 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SZYMANSKA, BASHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 183 GREAT HILL RD.
 City RIDGEFIELD State CT Zip Code 06877-2605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.409209
 Amount of Each Receipt this Period 190.00
 Memo Item CONTRIBUTION

B. TALBOT, CLAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 DECKBAR AVE. APT 139
 City JEFFERSON State LA Zip Code 70121-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382393
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TALBOT, CLAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 DECKBAR AVE. APT 139
 City JEFFERSON State LA Zip Code 70121-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413771
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4778 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALBOT, CLAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 DECKBAR AVE.
 APT 139
 City JEFFERSON State LA Zip Code 70121-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.413784
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. TALBOT, CLAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 DECKBAR AVE.
 APT 139
 City JEFFERSON State LA Zip Code 70121-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : SA11A.416117
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TALBOT, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2027 KILLARNEY WAY
 City BELLEVUE State WA Zip Code 98004-7045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 08 / 25 / 2016
Transaction ID : SA11A.379857
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4779 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALLEY, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7475 E GAINEY RANCH RD. #29
 City SCOTTSDALE State AZ Zip Code 85258-1523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407868
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TALLENT, REBECCA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1439 A ST NE APT C
 City WASHINGTON State DC Zip Code 20002-8432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DROPBOX Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.402093
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. TALLMON, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11889
 City FORT WORTH State TX Zip Code 76110-0889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362860
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4780 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALLMON, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 11889
 City FORT WORTH State TX Zip Code 76110-0889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379433
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TALMAGE, VALERIE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1661 PINE STREET, APT 438
 City SAN FRANCISCO State CA Zip Code 94109-0416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 07 / 2016
Transaction ID : SA11A.345786
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. TALMAGE, VALERIE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1661 PINE STREET, APT 438
 City SAN FRANCISCO State CA Zip Code 94109-0416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361266
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4781 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALTY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 POST XING
 City SOUTHAMPTON State NY Zip Code 11968-3446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BELVILLE PROSPECT MANAGEMENT Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.379431
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TAMKIN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1230 STONE CANYON ROAD
 City LOS ANGELES State CA Zip Code 90077-2920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.371447
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. TANAKA, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 FINCH WAY
 City FAIRFIELD State CA Zip Code 94533-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396885
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1275.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4782 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANAKA, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 FINCH WAY
 City FAIRFIELD State CA Zip Code 94533-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416405
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TANAKA, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 FINCH WAY
 City FAIRFIELD State CA Zip Code 94533-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416406
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TANENBAUM, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 PEARL BUCK RD
 City BRISTOL State PA Zip Code 19007-6809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANCE PARTNERS Occupation (for Individual) MANUFACTURING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346088
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4783 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TANKSLEY, KAREN, B., MS.,

Mailing Address 2687 SE LUPINE CT.

City HILLSBORO	State OR	Zip Code 97123-8336
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384685

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TANKSLEY, KAREN, B., MS.,

Mailing Address 2687 SE LUPINE CT.

City HILLSBORO	State OR	Zip Code 97123-8336
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384686

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TANKSLEY, KAREN, B., MS.,

Mailing Address 2687 SE LUPINE CT.

City HILLSBORO	State OR	Zip Code 97123-8336
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399545

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4784 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANKSLEY, KAREN, B., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2687 SE LUPINE CT.
 City HILLSBORO State OR Zip Code 97123-8336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419542
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TANNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9363 WILLOW POND CIRCLE
 City ELK GROVE State CA Zip Code 95624-1266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SACRAMENTO ASSN OF REALTORS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348434
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TANNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9363 WILLOW POND CIRCLE
 City ELK GROVE State CA Zip Code 95624-1266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SACRAMENTO ASSN OF REALTORS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372705
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4785 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANNER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9363 WILLOW POND CIRCLE
 City ELK GROVE State CA Zip Code 95624-1266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SACRAMENTO ASSN OF REALTORS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399935
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TAPP, F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 FRENCH PARK PL 103
 City EDMOND State OK Zip Code 73034-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.387895
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TAPP, F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 FRENCH PARK PL 103
 City EDMOND State OK Zip Code 73034-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390276
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4786 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAPP, F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 FRENCH PARK PL
 103
 City EDMOND State OK Zip Code 73034-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394499
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TAPP, F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 FRENCH PARK PL
 103
 City EDMOND State OK Zip Code 73034-7201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.404125
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TARAFDER, ABU, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 CLARKE STREET
 City BRENTWOOD State NY Zip Code 11717-2024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LNK INTERNATIONAL INC Occupation (for Individual) SUPERVISOR Q.A.DEPT.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.373787
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4787 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TARAFDER, ABU, Y., ,

Mailing Address **48 CLARKE STREET**

City **BRENTWOOD** State **NY** Zip Code **11717-2024**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LNK INTERNATIONAL INC** Occupation (for Individual) **SUPERVISOR Q.A.DEPT.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389771

Amount of Each Receipt this Period **35.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TARAFDER, ABU, Y., ,

Mailing Address **48 CLARKE STREET**

City **BRENTWOOD** State **NY** Zip Code **11717-2024**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **LNK INTERNATIONAL INC** Occupation (for Individual) **SUPERVISOR Q.A.DEPT.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417232

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TARANTINO, DOMINIC, A., MR.,

Mailing Address **450 EL CAMINO DEL MAR**

City **SAN FRANCISCO** State **CA** Zip Code **94121-1040**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.417140

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **635.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4788 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TASKER, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POBOX 3339
 City DULUTH State GA Zip Code 30096-0057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387270
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TASKER, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POBOX 3339
 City DULUTH State GA Zip Code 30096-0057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418071
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TASKER, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POBOX 3339
 City DULUTH State GA Zip Code 30096-0057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418082
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4789 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TASKER, BRENDA, , ,

Mailing Address **POBOX 3339**

City **DULUTH** State **GA** Zip Code **30096-0057**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.418085

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TATE, NAOMA, , ,

Mailing Address **BIG HAT RANCH**

City **CODY** State **WY** Zip Code **82414-**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt
09 / 02 / 2016

Transaction ID : SA11A.387687

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TATE, PAUL, , ,

Mailing Address **1082 TIMBERCREST DRIVE**

City **CASTLE PINES** State **CO** Zip Code **80108-8265**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **AG RESOURCE MANAGEMENT** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
07 / 14 / 2016

Transaction ID : SA11A.346219

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4790 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TATE, STANLEY, G., MR.,		Date of Receipt MM / DD / YYYY 07 / 05 / 2016
Mailing Address 1175 N.E. 125TH ST., STE. 102 102		Transaction ID : SA11A.345183
City NORTH MIAMI	State FL	Zip Code 33161-5009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer (for Individual) TATE ENTERPRISES	Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TATE, STANLEY, G., MR.,		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 1175 N.E. 125TH ST., STE. 102 102		Transaction ID : SA11A.357985
City NORTH MIAMI	State FL	Zip Code 33161-5009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) TATE ENTERPRISES	Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TATE, STANLEY, G., MR.,		Date of Receipt MM / DD / YYYY 08 / 23 / 2016
Mailing Address 1175 N.E. 125TH ST., STE. 102 102		Transaction ID : SA11A.376960
City NORTH MIAMI	State FL	Zip Code 33161-5009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) TATE ENTERPRISES	Occupation (for Individual) OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4791 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TATE, STANLEY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 N.E. 125TH ST., STE. 102
 102
 City NORTH MIAMI State FL Zip Code 33161-5009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TATE ENTERPRISES Occupation (for Individual) OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.385831
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TATE, STANLEY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 N.E. 125TH ST., STE. 102
 102
 City NORTH MIAMI State FL Zip Code 33161-5009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TATE ENTERPRISES Occupation (for Individual) OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 09 / 09 / 2016
Transaction ID : SA11A.392009
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TATE, STANLEY, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 N.E. 125TH ST., STE. 102
 102
 City NORTH MIAMI State FL Zip Code 33161-5009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TATE ENTERPRISES Occupation (for Individual) OWNER
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 09 / 20 / 2016
Transaction ID : SA11A.400701
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4792 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TATE, STANLEY, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1175 N.E. 125TH ST., STE. 102
102
City NORTH MIAMI State FL Zip Code 33161-5009
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) TATE ENTERPRISES Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412586
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TAUBER, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 518 SHADYWOOD ROAD
City HOUSTON State TX Zip Code 77057-1438
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) TAUBER OIL COMPANY Occupation (for Individual) PRINCIPAL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398053
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TAULBORG, BERNARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11617 BURT STREET
City OMAHA State NE Zip Code 68154-1506
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361331
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4793 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAULBORG, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11617 BURT STREET
 City OMAHA State NE Zip Code 68154-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381292
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TAVENNER, BETSEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5601 DUNROBIN DRIVE, UNIT 5207
 City SARASOTA State FL Zip Code 34238-8504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354222
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TAYLOR, ANDREW, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1147 LOG CABIN LANE
 City SAINT LOUIS State MO Zip Code 63124-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENTERPRISE HOLDINGS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 19400.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.358860
 Amount of Each Receipt this Period 19400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 19750.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4794 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, ANN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33520 COUNTY ROAD 20
 City WOODLAND State CA Zip Code 95695-9204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394727
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TAYLOR, BARBARA, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1147 LOG CABIN LANE
 City ST. LOUIS State MO Zip Code 63124-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19400.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.358865
 Amount of Each Receipt this Period 19400.00
 Memo Item CONTRIBUTION

C. TAYLOR, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2633 S. KINGS ROAD
 City VIRGINIA BEACH State VA Zip Code 23452-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : SA11A.364152
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 19670.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4795 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2633 S. KINGS ROAD

City VIRGINIA BEACH	State VA	Zip Code 23452-7718
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2016

Transaction ID : SA11A.364153

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TAYLOR, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2633 S. KINGS ROAD

City VIRGINIA BEACH	State VA	Zip Code 23452-7718
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2016

Transaction ID : SA11A.364154

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. TAYLOR, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2633 S. KINGS ROAD

City VIRGINIA BEACH	State VA	Zip Code 23452-7718
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2016

Transaction ID : SA11A.392104

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4796 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2633 S. KINGS ROAD

City VIRGINIA BEACH	State VA	Zip Code 23452-7718
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : SA11A.392105

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. TAYLOR, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2633 S. KINGS ROAD

City VIRGINIA BEACH	State VA	Zip Code 23452-7718
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401548

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. TAYLOR, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2633 S. KINGS ROAD

City VIRGINIA BEACH	State VA	Zip Code 23452-7718
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401549

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4797 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2633 S. KINGS ROAD

City VIRGINIA BEACH	State VA	Zip Code 23452-7718
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.410639

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. TAYLOR, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1953 S. VIEW DR.

City FORT COLLINS	State CO	Zip Code 80524-5012
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2016

Transaction ID : SA11A.347620

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. TAYLOR, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1953 S. VIEW DR.

City FORT COLLINS	State CO	Zip Code 80524-5012
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
805.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2016

Transaction ID : SA11A.349182

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4798 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1953 S. VIEW DR.
City FORT COLLINS State CO Zip Code 80524-5012
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 805.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366777
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TAYLOR, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1953 S. VIEW DR.
City FORT COLLINS State CO Zip Code 80524-5012
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 805.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396829
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TAYLOR, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 30 CYRESS LANE
City WINTER PARK State FL Zip Code 32789-1203
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369611
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4799 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8016 SPARTAN DR
 City YOUNGSTOWN State OH Zip Code 44512-5866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAYLOR OF BOARDMAN Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399369
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TAYLOR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 PALM WAY
 City VERO BEACH State FL Zip Code 32963-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354104
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TAYLOR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 QUARRY TOP DRIVE
 City WADSWORTH State OH Zip Code 44281-8357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE MARKETING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416197
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4800 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 227 PIPING ROCK RD
City LOCUST VALLEY State NY Zip Code 11560-2504
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405900
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TAYLOR, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1017 N. PEPPERTREE DRIVE
City DRAPER State AZ Zip Code 85234-4953
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.360018
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TAYLOR, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1017 N. PEPPERTREE DRIVE
City DRAPER State AZ Zip Code 85234-4953
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382424
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4801 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 N. PEPPERTREE DRIVE
 City DRAPER State AZ Zip Code 85234-4953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416175
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TAYLOR, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MONROE STREET
 City DENVER State CO Zip Code 80206-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DECON LABS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357367
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. TAYLOR, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MONROE STREET
 City DENVER State CO Zip Code 80206-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DECON LABS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368529
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4802 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MONROE STREET
 City DENVER State CO Zip Code 80206-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DECON LABS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409747
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. TAYLOR, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MONROE STREET
 City DENVER State CO Zip Code 80206-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DECON LABS INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409748
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. TAYLOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9925 HUNTCLIFF TRACE
 City ATLANTA State GA Zip Code 30350-2717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENNETT THRASHER LLP Occupation (for Individual) CPA/CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352659
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4803 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9925 HUNTCLIFF TRACE

City ATLANTA	State GA	Zip Code 30350-2717
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BENNETT THRASHER LLP	Occupation (for Individual) CPA/CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2016

Transaction ID : SA11A.376119

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. TAYLOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9925 HUNTCLIFF TRACE

City ATLANTA	State GA	Zip Code 30350-2717
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BENNETT THRASHER LLP	Occupation (for Individual) CPA/CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11A.400834

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TAYLOR, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6248 FOREST PRESERVE ROAD

City ROCKTON	State IL	Zip Code 61072-9589
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TAYLORBUILT FARM	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2016

Transaction ID : SA11A.378718

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4804 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6248 FOREST PRESERVE ROAD
 City ROCKTON State IL Zip Code 61072-9589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAYLORBUILT FARM Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.409023
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TAYLOR, THOMAS, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25252 BRIGANTINE DRIVE
 City DANA POINT State CA Zip Code 92629-1424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.406618
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. TEAGUE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 COTTONWOOD LANE
 City VERNON State TX Zip Code 76384-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M AGRILIFE RESEARCH Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352373
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4805 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEAGUE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 COTTONWOOD LANE
 City VERNON State TX Zip Code 76384-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M AGRILIFE RESEARCH Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375922
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TEAGUE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 COTTONWOOD LANE
 City VERNON State TX Zip Code 76384-5702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS A&M AGRILIFE RESEARCH Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401510
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. TEBAY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 LIA FAIL WAY
 City COS COB State CT Zip Code 06807-2200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.374975
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4806 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TEBAY, MICHAEL, , ,

Mailing Address 10 LIA FAIL WAY

City COS COB	State CT	Zip Code 06807-2200
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.401011

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TEDOLDI, ROBERT, , ,

Mailing Address 1438 WOODSTREAM DRIVE

City OLDSMAR	State FL	Zip Code 34677-4832
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357249

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TEDOLDI, ROBERT, , ,

Mailing Address 1438 WOODSTREAM DRIVE

City OLDSMAR	State FL	Zip Code 34677-4832
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.404720

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4807 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEDOLDI, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1438 WOODSTREAM DRIVE
 City OLDSMAR State FL Zip Code 34677-4832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409399
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TEELING, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 STARLING PASS
 City SPRING BRANCH State TX Zip Code 78070-5482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374795
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 ROYAL PALM WAY 3G
 City PALM BEACH State FL Zip Code 33480-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.359045
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4808 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TELL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 ROYAL PALM WAY
3G

City PALM BEACH State FL Zip Code 33480-4213

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2016

Transaction ID : SA11A.387878

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. TELTSCH, JO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 353 W 37 ST

City SEA ISLAND State GA Zip Code 31561-9748

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2016

Transaction ID : SA11A.376048

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. TEMPLE, G., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 5 / 1644 US 3 NORTH

City TWIN MOUNTAIN State NH Zip Code 03595-0005

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
219.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2016

Transaction ID : SA11A.377473

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4809 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEMPLE, G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 5 / 1644 US 3 NORTH
 City TWIN MOUNTAIN State NH Zip Code 03595-0005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.377474
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TEMPLE, G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 5 / 1644 US 3 NORTH
 City TWIN MOUNTAIN State NH Zip Code 03595-0005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382897
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

C. TEMPLE, G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 5 / 1644 US 3 NORTH
 City TWIN MOUNTAIN State NH Zip Code 03595-0005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401437
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4810 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEMPLE, G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 5 / 1644 US 3 NORTH
 City TWIN MOUNTAIN State NH Zip Code 03595-0005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411328
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. TEMPLETON, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 CAROLINA AVE
 City FORT THOMAS State KY Zip Code 41075-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOUCHPOINT PACKAGING Occupation (for Individual) ACCOUNT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397968
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TEMPLE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4301 BRYSON COURT
 City CHARLOTTE State NC Zip Code 28211-3868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396363
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4811 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TENG DIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 S 7TH STREET SUITE 3850

City MINNEAPOLIS	State MN	Zip Code 55402-4109
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALLISON-WILLIAMS CO	Occupation (for Individual) INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.356173

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. TENNESSEN, ALAN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 GARLAND LANE N

City MINNEAPOLIS	State MN	Zip Code 55447-2274
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA11A.361341

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. TENNYSON, CATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2245 SEVILLANO COURT

City LIVERMORE	State CA	Zip Code 94550-6881
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.406069

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4812 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TENNYSON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2245 SEVILLANO COURT
 City LIVERMORE State CA Zip Code 94550-6881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.406074
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TENNYSON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2245 SEVILLANO COURT
 City LIVERMORE State CA Zip Code 94550-6881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.406094
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TENNYSON, CATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2245 SEVILLANO COURT
 City LIVERMORE State CA Zip Code 94550-6881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.406096
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4813 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TERLEP, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 GOLF CLUB LANE
 City SPRING HILL State FL Zip Code 34609-0303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHIROPRACTIC PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.383225
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TERLEP, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 GOLF CLUB LANE
 City SPRING HILL State FL Zip Code 34609-0303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHIROPRACTIC PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.397946
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TERLEP, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4530 GOLF CLUB LANE
 City SPRING HILL State FL Zip Code 34609-0303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CHIROPRACTIC PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 25 / 2016**
Transaction ID : SA11A.408364
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4814 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TERRY, CLAIBORNE, , ,

Mailing Address 2300 CEDARFIELD PARKWAY, APT 152

City HENRICO State VA Zip Code 23233-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383406

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TERWILLIGER, GEORGE, , MR.,

Mailing Address 714 POTOMAC ST

City ALEXANDRIA State VA Zip Code 22314-3878

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCGUIREWOODS LLP Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401158

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TESTWUIDE SR, THOMAS, , ,

Mailing Address 7103 PROCTOR ROAD

City SARASOTA State FL Zip Code 34241-9257

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SKANA ALUMINUM Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380391

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4815 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TESTWUIDE SR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7103 PROCTOR ROAD
 City SARASOTA State FL Zip Code 34241-9257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKANA ALUMINUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380392
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TESTWUIDE SR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7103 PROCTOR ROAD
 City SARASOTA State FL Zip Code 34241-9257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKANA ALUMINUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380395
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TESTWUIDE SR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7103 PROCTOR ROAD
 City SARASOTA State FL Zip Code 34241-9257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKANA ALUMINUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380397
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4816 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TESTWUIDE SR, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7103 PROCTOR ROAD
 City SARASOTA State FL Zip Code 34241-9257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKANA ALUMINUM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402229
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TEUBER, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 TTH ST W
 City HASTINGS State MN Zip Code 55033-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352071
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. TEUBER, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 TTH ST W
 City HASTINGS State MN Zip Code 55033-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372489
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4817 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEUBER, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 TTH ST W

City HASTINGS	State MN	Zip Code 55033-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.388753

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. TEUBER, VINCENT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 TTH ST W

City HASTINGS	State MN	Zip Code 55033-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2016

Transaction ID : SA11A.399863

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. TEVEPAUGH, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1859

City HUNTSVILLE	State AL	Zip Code 35807-0859
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.404918

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4818 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEVEPAUGH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1859
 City HUNTSVILLE State AL Zip Code 35807-0859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410940
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. TEWES, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 W NEBRASKA STREET
 City FRANKFORT State IL Zip Code 60423-1484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381331
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. THACKERAY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 WALKER LN
 City SALT LAKE CTY State UT Zip Code 84117-7729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE THACKERAY CO Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.360175
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4819 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THALER, ARNOLD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1281 GULF OF MEXICO DRIVE
UNIT 108

City LONGBOAT KEY State FL Zip Code 34228-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376530

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. THALER, ARNOLD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1281 GULF OF MEXICO DRIVE
UNIT 108

City LONGBOAT KEY State FL Zip Code 34228-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376933

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. THEISSEN, DONALD, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10259 LANCASTER LANE

City SAINT PAUL State MN Zip Code 55129-8507

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362818

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 450.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4820 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THEISEN, MARITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2606 HACIENDA DRIVE
 City DUBUQUE State IA Zip Code 52002-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THEISEN SUPPLY Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383389
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. THEIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MISSION DR
 City MISSION HILLS State KS Zip Code 66208-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384580
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THEIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MISSION DR
 City MISSION HILLS State KS Zip Code 66208-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384582
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4821 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THEIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MISSION DR
 City MISSION HILLS State KS Zip Code 66208-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402529
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. THEIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MISSION DR
 City MISSION HILLS State KS Zip Code 66208-1249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402530
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. THETFORD, JACK, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 UPTOWN PARK BOULEVARD
 APT 22
 City HOUSTON State TX Zip Code 77056-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359692
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4822 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THETFORD, JACK, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 UPTOWN PARK BOULEVARD
 APT 22
 City HOUSTON State TX Zip Code 77056-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386898
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. THETFORD, JACK, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 UPTOWN PARK BOULEVARD
 APT 22
 City HOUSTON State TX Zip Code 77056-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419426
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THIEL, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 S PALOUSE ST
 City WALLA WALLA State WA Zip Code 99362-3026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TELESIS Occupation (for Individual) STRUCTURAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410040
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4823 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THIELE, GAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35004 N SUNSET TRAIL

City CAVE CREEK	State AZ	Zip Code 85331-9125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402574

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. THIELE, GAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35004 N SUNSET TRAIL

City CAVE CREEK	State AZ	Zip Code 85331-9125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407764

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. THIELE, GAIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35004 N SUNSET TRAIL

City CAVE CREEK	State AZ	Zip Code 85331-9125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410140

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4824 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THIELE, JOHN, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 SW 31ST STREET
APT 217

City TOPEKA State KS Zip Code 66611-2195

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381067

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. THIERRY, HENRY, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 765 EDGEWOOD ROAD

City REDWOOD CITY State CA Zip Code 94062-1813

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.389495

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. THOM, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35559 PONTIAC DRIVE

City BROOKSHIRE State TX Zip Code 77423-9540

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.389808

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4825 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMASON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 ST EUSTACIUS LN
 City BONITA SPRINGS State FL Zip Code 34134-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.354063
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. THOMASON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 ST EUSTACIUS LN
 City BONITA SPRINGS State FL Zip Code 34134-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.354064
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. THOMASON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 ST EUSTACIUS LN
 City BONITA SPRINGS State FL Zip Code 34134-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375836
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4826 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMASON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 ST EUSTACIUS LN
 City BONITA SPRINGS State FL Zip Code 34134-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413543
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. THOMASON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 ST EUSTACIUS LN
 City BONITA SPRINGS State FL Zip Code 34134-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413544
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. THOMAS, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4935 WINDSONG PARK DR.
 City COLLIERVILLE State TN Zip Code 38017-9380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349337
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4827 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4935 WINDSONG PARK DR.
 City COLLIERVILLE State TN Zip Code 38017-9380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374782
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMAS, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4935 WINDSONG PARK DR.
 City COLLIERVILLE State TN Zip Code 38017-9380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399572
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. THOMAS, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4935 WINDSONG PARK DR.
 City COLLIERVILLE State TN Zip Code 38017-9380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405509
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4828 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9185 COUNTY RD N
 City SAYNER State WI Zip Code 54560-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11A.346940
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMAS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9185 COUNTY RD N
 City SAYNER State WI Zip Code 54560-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365764
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. THOMAS, JOHN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4590 BRITTANY RD
 City OTTAWA HILLS State OH Zip Code 43615-2310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391354
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4829 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4209 LASSITER MILL ROAD
UNIT 248

City RALEIGH State NC Zip Code 27609-5798

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381410

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. THOMAS, ROBERT, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 PATTI LYNN LANE

City HOUSTON State TX Zip Code 77024-7120

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2016

Transaction ID : SA11A.349561

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. THOMAS, ROBERT, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 PATTI LYNN LANE

City HOUSTON State TX Zip Code 77024-7120

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2016

Transaction ID : SA11A.394436

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4830 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 PATTI LYNN LANE
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401334
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. THOMAS, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 PATTI LYNN LANE
 City HOUSTON State TX Zip Code 77024-7120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412147
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMAS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 850 R ROAD
 City MACK State CO Zip Code 81525-9757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372434
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4831 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 850 R ROAD
 City MACK State CO Zip Code 81525-9757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372442
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, ALAN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9147 RUNNYMEADE RD
 City JACKSONVILLE State FL Zip Code 32257-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352527
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. THOMPSON, ALAN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9147 RUNNYMEADE RD
 City JACKSONVILLE State FL Zip Code 32257-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362195
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4832 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, ALAN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9147 RUNNYMEADE RD

City JACKSONVILLE	State FL	Zip Code 32257-5243
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382651

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. THOMPSON, ALAN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9147 RUNNYMEADE RD

City JACKSONVILLE	State FL	Zip Code 32257-5243
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.387066

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. THOMPSON, ALAN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9147 RUNNYMEADE RD

City JACKSONVILLE	State FL	Zip Code 32257-5243
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401317

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4833 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, ALAN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9147 RUNNYMEADE RD
 City JACKSONVILLE State FL Zip Code 32257-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410102
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. THOMPSON, ALAN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9147 RUNNYMEADE RD
 City JACKSONVILLE State FL Zip Code 32257-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413058
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. THOMPSON, CONRAD, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 17TH STREET NE
 City ROCHESTER State MN Zip Code 55906-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.348095
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4834 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 HEMLOCK DR SE
 City BLACKSBURG State VA Zip Code 24060-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382511
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 HEMLOCK DR SE
 City BLACKSBURG State VA Zip Code 24060-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 06 / 2016
Transaction ID : SA11A.391288
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. THOMPSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 HEMLOCK DR SE
 City BLACKSBURG State VA Zip Code 24060-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : SA11A.398214
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4835 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 HEMLOCK DR SE
 City BLACKSBURG State VA Zip Code 24060-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399526
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 HEMLOCK DR SE
 City BLACKSBURG State VA Zip Code 24060-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405367
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. THOMPSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 HEMLOCK DR SE
 City BLACKSBURG State VA Zip Code 24060-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405368
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4836 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 HEMLOCK DR SE

City BLACKSBURG	State VA	Zip Code 24060-5234
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418766

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. THOMPSON, DOUGLAS, H., , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2416 NW 23RD TERRACE

City GAINESVILLE	State FL	Zip Code 32605-2809
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406679

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. THOMPSON, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1040 GREENSKEEPER WAY

City CENTERVILLE	State OH	Zip Code 45458-3971
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350468

Amount of Each Receipt this Period
85.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4837 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 GREENSKEEPER WAY
 City CENTERVILLE State OH Zip Code 45458-3971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376106
 Amount of Each Receipt this Period 85.00
 Memo Item CONTRIBUTION

B. THOMPSON, GARY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19874 FESTIVAL LOOP
 City PRINCETON State MO Zip Code 64673-9827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370874
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, GARY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19874 FESTIVAL LOOP
 City PRINCETON State MO Zip Code 64673-9827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390097
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 435.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 4838 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 868
 City MARSHALL State VA Zip Code 20116-0868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2016
Transaction ID : SA11A.388933
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. THOMPSON, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2662 ORCHARD RUN SE
 City ATLANTA State GA Zip Code 30339-4651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARKED INSURANCE CO Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378551
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. THOMPSON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 LEFT FORK RD.
 City BOULDER State CO Zip Code 80302-9252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SATINWOOD CONSTRUCTION INC, Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373161
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4839 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 LEFT FORK RD.
 City BOULDER State CO Zip Code 80302-9252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SATINWOOD CONSTRUCTION INC, Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400272
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMPSON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 LEFT FORK RD.
 City BOULDER State CO Zip Code 80302-9252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SATINWOOD CONSTRUCTION INC, Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408318
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 LEFT FORK RD.
 City BOULDER State CO Zip Code 80302-9252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SATINWOOD CONSTRUCTION INC, Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414212
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4840 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, JERE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4311 OAK LAWN AVE.
 520
 City DALLAS State TX Zip Code 75219-2315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348668
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. THOMPSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1916 APPLEWOOD CIRCLE
 City HAGERSTOWN State MD Zip Code 21740-6726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348546
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. THOMPSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 SPORTING HILL BRIDGE RD
 City THOMPSONS STATION State TN Zip Code 37179-5385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350078
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4841 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 315 SUNSET ROAD

City WINNETKA	State IL	Zip Code 60093-4229
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11A.379738

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. THOMPSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1916 APPLEWOOD CIRCLE

City HAGERSTOWN	State MD	Zip Code 21740-6726
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.420442

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. THOMPSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1916 APPLEWOOD CIRCLE

City HAGERSTOWN	State MD	Zip Code 21740-6726
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.420453

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4842 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, JOHN, R., DR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 SOUTHERN CROSS DR
 City COLORADO SPRINGS State CO Zip Code 80906-1046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JRT LLC Occupation (for Individual) RADIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355785
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. THOMPSON, KAREN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1158 WALKER RD
 City MCCORMICK State SC Zip Code 29835-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373180
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. THOMPSON, KAREN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1158 WALKER RD
 City MCCORMICK State SC Zip Code 29835-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381815
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4843 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, KAREN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1158 WALKER RD
 City MCCORMICK State SC Zip Code 29835-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.404317
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. THOMPSON, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 W 118 TERR
 City OVERLAND PARK State KS Zip Code 66210-3852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 28 / 2016**
Transaction ID : SA11A.357512
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 W 118 TERR
 City OVERLAND PARK State KS Zip Code 66210-3852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382803
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4844 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4021 COLE AVENUE
 209
 City DALLAS State TX Zip Code 75204-1851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL DRAFTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356223
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. THOMPSON, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4021 COLE AVENUE
 209
 City DALLAS State TX Zip Code 75204-1851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL DRAFTSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356225
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, LUCILLE, R., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 GLENEAGLES
 City SHOAL CREEK State AL Zip Code 35242-5913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358554
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4845 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7175 FOX LAKE DRIVE
 City BLACKLICK State OH Zip Code 43004-8559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHO ONCOLOGY HEMATOLOGY. LLC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 09 / 2016**
Transaction ID : SA11A.392099
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THOMPSON, MATTIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 NW BOUNDRY ROAD
 City ERICK State OK Zip Code 73645-4005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.347927
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THOMPSON, MICHAEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 323 N. COLUMBUS ST.
 City ALEXANDRIA State VA Zip Code 22314-2413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.379970
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4846 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, MICHAEL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 323 N. COLUMBUS ST.
 City ALEXANDRIA State VA Zip Code 22314-2413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407515
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. THOMPSON, NIKKI, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 RHODES AVENUE
 City BAY SHORE State NY Zip Code 11706-6613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.401735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THOMPSON, NIKKI, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 RHODES AVENUE
 City BAY SHORE State NY Zip Code 11706-6613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416043
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4847 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, JR., RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 BEDFORD ROAD
 City LINCOLN State MA Zip Code 01773-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350127
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. THOMPSON, JR., RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 BEDFORD ROAD
 City LINCOLN State MA Zip Code 01773-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357112
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. THOMPSON, JR., RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 BEDFORD ROAD
 City LINCOLN State MA Zip Code 01773-2037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358237
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4848 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. THOMPSON, JR., RANDALL, , ,

Mailing Address **34 BEDFORD ROAD**

City LINCOLN	State MA	Zip Code 01773-2037
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
07 / 31 / 2016

Transaction ID : SA11A.359623

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THOMPSON, JR., RANDALL, , ,

Mailing Address **34 BEDFORD ROAD**

City LINCOLN	State MA	Zip Code 01773-2037
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
08 / 19 / 2016

Transaction ID : SA11A.374400

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. THOMPSON, TOMMY, G., , ,

Mailing Address **PO BOX 18657**

City WASHINGTON	State DC	Zip Code 20036-8657
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 08 / 2016

Transaction ID : SA11A.391352

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4849 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, W REID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 W KIRKE STREET
 City CHEVY CHASE State MD Zip Code 20815-4246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.379724
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. THOMSON, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11700 PRESTON RD STE 660-206 STE 660-206
 City DALLAS State TX Zip Code 75230-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390661
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THOMSON, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11700 PRESTON RD STE 660-206 STE 660-206
 City DALLAS State TX Zip Code 75230-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.405272
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4850 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. THOMSON, CLIFFORD, , ,		Date of Receipt MM / DD / YYYY 09 / 23 / 2016 Transaction ID : SA11A.405274
Mailing Address 11700 PRESTON RD STE 660-206 STE 660-206		Amount of Each Receipt this Period 100.00
City DALLAS	State TX	Zip Code 75230-6112
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. THOMSON, JOHN, , ,		Date of Receipt MM / DD / YYYY 07 / 19 / 2016 Transaction ID : SA11A.349278
Mailing Address 260 CRANDON BOULEVARD SUITE 25		Amount of Each Receipt this Period 100.00
City KEY BISCAVNE	State FL	Zip Code 33149-1537
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. THOMSON, JOHN, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016 Transaction ID : SA11A.402893
Mailing Address 260 CRANDON BOULEVARD SUITE 25		Amount of Each Receipt this Period 100.00
City KEY BISCAVNE	State FL	Zip Code 33149-1537
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4851 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 260 CRANDON BOULEVARD
 SUITE 25

City KEY BISCAWAYNE State FL Zip Code 33149-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 30 / 2016

Transaction ID : SA11A.418731

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

B. THOMSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 260 CRANDON BOULEVARD
 SUITE 25

City KEY BISCAWAYNE State FL Zip Code 33149-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 30 / 2016

Transaction ID : SA11A.418734

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

C. THOMS, NORMAN, W., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5420 SE 37TH STREET

City TECUMSEH State KS Zip Code 66542-9161

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) SURGEON

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 08 / 29 / 2016

Transaction ID : SA11A.381551

Amount of Each Receipt this Period
 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4852 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMS, NORMAN, W., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5420 SE 37TH STREET
 City TECUMSEH State KS Zip Code 66542-9161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392543
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. THOMS, NORMAN, W., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5420 SE 37TH STREET
 City TECUMSEH State KS Zip Code 66542-9161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407102
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THONET, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2316 OCEAN BOULEVARD
 City RYE BEACH State NH Zip Code 03871-9008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STORBRIDGE GLOBAL, INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.353012
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4853 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THONPSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 INDEPENDENCE DR.
 City BORDENTOWN State NJ Zip Code 08505-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHOENIX ADVISORS, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349486
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THORESEN, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2287 MORROW ROAD
 City PITTSBURGH State PA Zip Code 15241-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383234
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. THORESEN, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2287 MORROW ROAD
 City PITTSBURGH State PA Zip Code 15241-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407983
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4854 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THORNTON, PATRICK, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 N ARLINGTON HTS RD
 City ARLINGTON HTS State IL Zip Code 60004-5662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT MOONEY INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408036
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THORNBURGH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 ISLAND DR
 City PALM BEACH State FL Zip Code 33480-4747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORSAIR INVESTMENTS Occupation (for Individual) EXEC MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400505
 Amount of Each Receipt this Period 30000.00
 Memo Item CONTRIBUTION

C. THROHN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3
 City LAKELAND State FL Zip Code 33802-0003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369435
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 30500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4855 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THRUSH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 865 SEDDON COVE WAY
 City TAMPA State FL Zip Code 33602-5704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOFFITT CANCER CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411126
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. THURIN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 SAVANNAH CREEK
 City BEAUMONT State CA Zip Code 92223-7488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONE DIGITAL Occupation (for Individual) PRINCIPAL/BENEFIT CONSULTRANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421968
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. THURIN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 SAVANNAH CREEK
 City BEAUMONT State CA Zip Code 92223-7488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONE DIGITAL Occupation (for Individual) PRINCIPAL/BENEFIT CONSULTRANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422641
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4856 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THURMAN, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 850842
 City MESQUITE State TX Zip Code 75185-0842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392851
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TIBBALS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8150 N. CENTRAL EXP; APT 1800
 City DALLAS State TX Zip Code 75206-1883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWT Occupation (for Individual) ATTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408503
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TIBERIUS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 772 CHIPPENHAM COURT
 City ST. GEORGE State UT Zip Code 84770-6106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386081
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4857 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIBERIUS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 772 CHIPPENHAM COURT
 City ST. GEORGE State UT Zip Code 84770-6106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386083
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TIDONA, NANCY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6460 GRASSLANDS COURT
 City WESTERVILLE State OH Zip Code 43082-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVIGATOR Occupation (for Individual) COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372192
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TIDONA, NANCY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6460 GRASSLANDS COURT
 City WESTERVILLE State OH Zip Code 43082-9542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVIGATOR Occupation (for Individual) COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399971
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4858 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TIDONA, NANCY, K., ,

Mailing Address 6460 GRASSLANDS COURT

City WESTERVILLE	State OH	Zip Code 43082-9542
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAVIGATOR	Occupation (for Individual) COMMUNICATIONS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016

Transaction ID : SA11A.413550

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TIDONA, NANCY, K., ,

Mailing Address 6460 GRASSLANDS COURT

City WESTERVILLE	State OH	Zip Code 43082-9542
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAVIGATOR	Occupation (for Individual) COMMUNICATIONS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11A.414706

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TIDONA, NANCY, K., ,

Mailing Address 6460 GRASSLANDS COURT

City WESTERVILLE	State OH	Zip Code 43082-9542
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAVIGATOR	Occupation (for Individual) COMMUNICATIONS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11A.420440

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4859 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIDWELL, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 PARK PL STE 900
 City BIRMINGHAM State AL Zip Code 35203-4803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIDWELL GROUP Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.395811
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. TIEMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9439 BELLAIRE LANE
 City SPRING GROVE State IL Zip Code 60081-8020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349327
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TIEMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9439 BELLAIRE LANE
 City SPRING GROVE State IL Zip Code 60081-8020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399541
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4860 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIEMAN, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9439 BELLAIRE LANE
 City SPRING GROVE State IL Zip Code 60081-8020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408947
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TIEN, YIFE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 PONCE DE LEON BLVD PH 1
 City CORAL GABLES State FL Zip Code 33134-4097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL EDUC. ADMINISTRATIVE SERVICES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360329
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. TIGNER, WARREN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 MILLER ROAD
 City ROSHARON State TX Zip Code 77583-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373414
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4861 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIGNER, WARREN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 MILLER ROAD
 City ROSHARON State TX Zip Code 77583-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396562
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TIGNER, WARREN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 MILLER ROAD
 City ROSHARON State TX Zip Code 77583-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411751
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TIGNER, WARREN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2203 MILLER ROAD
 City ROSHARON State TX Zip Code 77583-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411784
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4862 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TILDEN, BRAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1168 HARVARD AVE E
8
City SEATTLE State WA Zip Code 98102-4397
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ALASKA AIRLINES Occupation (for Individual) CHIEF EXECUTIVE OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2016
Transaction ID : SA11A.358956
Amount of Each Receipt this Period
5000.00
 Memo Item
CONTRIBUTION

B. TILL, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2563 WILLOWBROOK CIRCLE
City BIRMINGHAM State AL Zip Code 35242-3441
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2016
Transaction ID : SA11A.375781
Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

C. TILL, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2563 WILLOWBROOK CIRCLE
City BIRMINGHAM State AL Zip Code 35242-3441
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼
950.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016
Transaction ID : SA11A.387411
Amount of Each Receipt this Period
100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4863 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TILL, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2563 WILLOWBROOK CIRCLE
 City BIRMINGHAM State AL Zip Code 35242-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387412
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TILL, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2563 WILLOWBROOK CIRCLE
 City BIRMINGHAM State AL Zip Code 35242-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404351
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TILL, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2563 WILLOWBROOK CIRCLE
 City BIRMINGHAM State AL Zip Code 35242-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419695
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4864 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TILL, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2563 WILLOWBROOK CIRCLE
 City BIRMINGHAM State AL Zip Code 35242-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419697
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TILLERSON, REX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 DOVE CREEK ROAD
 City ARGYLE State TX Zip Code 76226-6397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXXONMOBILE CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10400.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.396981
 Amount of Each Receipt this Period 10400.00
 Memo Item CONTRIBUTION

C. TILTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1879 SEVEN HILLS DRIVE
 City HEMET State CA Zip Code 92545-8167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354527
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4865 OF 5722
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TILTON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1879 SEVEN HILLS DRIVE

City HEMET	State CA	Zip Code 92545-8167
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SA11A.380003

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. TILTON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1879 SEVEN HILLS DRIVE

City HEMET	State CA	Zip Code 92545-8167
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2016

Transaction ID : SA11A.408684

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. TILTON, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1879 SEVEN HILLS DRIVE

City HEMET	State CA	Zip Code 92545-8167
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2016

Transaction ID : SA11A.412600

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4866 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TIMM, LOIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 GROSSE PINES DRIVE
 City ROCHESTER HILLS State MI Zip Code 48309-1829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390794
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TIMMONS, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1608 CRESTWOOD LANE
 City MCLEAN State VA Zip Code 22101-3310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAM Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.402086
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. TIMPE-BRENNAN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 BLALOCK ROAD
 City HOUSTON State TX Zip Code 77024-7307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANN TIMPE-BRENNAN, P.C. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387160
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4867 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TJARKSEN, DONALD, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4298 BRAEBURN DRIVE
 City MUSKEGON State MI Zip Code 49441-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377871
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TOBERTS, CHRISS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 SW 3RD ST
 City WAGONER State OK Zip Code 74467-5518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTS FAMILY CLINIC Occupation (for Individual) OSTEOPATHIC PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.387030
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TOBERTS, CHRISS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 SW 3RD ST
 City WAGONER State OK Zip Code 74467-5518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTS FAMILY CLINIC Occupation (for Individual) OSTEOPATHIC PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406062
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4868 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOBERTS, CHRISS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1306 SW 3RD ST
City WAGONER State OK Zip Code 74467-5518
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ROBERTS FAMILY CLINIC Occupation (for Individual) OSTEOPATHIC PHYSICIAN
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410535
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TOBIN, PHILIP, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 38763 N OAKCREST LANE
City WADSWORTH State IL Zip Code 60083-9557
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348745
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TOBIN, PHILIP, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 38763 N OAKCREST LANE
City WADSWORTH State IL Zip Code 60083-9557
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390291
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4869 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOBIN, PHILIP, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38763 N OAKCREST LANE
 City WADSWORTH State IL Zip Code 60083-9557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406652
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TODD, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3955 ROYAL PENNON COURT
 City PEACHTREE CORNERS State GA Zip Code 30092-2175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383383
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TOI, SEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 EAST 75 STREET 5
 City NEW YORK State NY Zip Code 10021-2629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FASHION DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.374961
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4870 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOINTON, ROBERT, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6305 26TH ST.

City GREELEY	State CO	Zip Code 80634-8929
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHELPS-TOINTON, INC.	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.356843

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. TOLBERT, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 E BROADWAY

City LOGANSPORT	State IN	Zip Code 46947-2004
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.357899

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. TOLBERT, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 E BROADWAY

City LOGANSPORT	State IN	Zip Code 46947-2004
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

Transaction ID : SA11A.364218

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4871 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TOLBERT, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 E BROADWAY

City LOGANSPORT	State IN	Zip Code 46947-2004
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016

Transaction ID : SA11A.378454

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

B. TOLBERT, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 E BROADWAY

City LOGANSPORT	State IN	Zip Code 46947-2004
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.401708

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. TOLBERT, FRANK, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 E BROADWAY

City LOGANSPORT	State IN	Zip Code 46947-2004
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2016

Transaction ID : SA11A.411836

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4872 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOLLETTE, HENRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 45TH ST
 City SACRAMENTO State CA Zip Code 95819-3410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378983
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TOLLETTE, HENRY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 45TH ST
 City SACRAMENTO State CA Zip Code 95819-3410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.409027
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TOM, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 MULBERRY LANE
 City BOERNE State TX Zip Code 78006-7975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.358132
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	259.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4873 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOM, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 MULBERRY LANE
 City BOERNE State TX Zip Code 78006-7975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408795
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TOMAI, DANIEL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 OCEANIC AVENUE
 City STATEN ISLAND State NY Zip Code 10312-6513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCG Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392587
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

C. TOMASSO, DONALD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9508 PURCELL DRIVE
 City POTOMAC State MD Zip Code 20854-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366529
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4874 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMASSO, DONALD, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9508 PURCELL DRIVE

City POTOMAC State MD Zip Code 20854-4542

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
09 / 09 / 2016
Transaction ID : SA11A.392076

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. TOMASSO, DONALD, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9508 PURCELL DRIVE

City POTOMAC State MD Zip Code 20854-4542

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11A.400737

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. TOMPKINS, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61708 BROKEN TOP DRIVE

City BEND State OR Zip Code 97702-1088

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2750.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.374574

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4875 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMPKINS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61708 BROKEN TOP DRIVE
 City BEND State OR Zip Code 97702-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387466
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TOMPKINS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61708 BROKEN TOP DRIVE
 City BEND State OR Zip Code 97702-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399532
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TOMPKINS, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61708 BROKEN TOP DRIVE
 City BEND State OR Zip Code 97702-1088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407837
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1750.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4876 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOMPKINS, ROGER, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8200 SHADETREE CT
 City JACKSONVILLE State FL Zip Code 32256-7153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384254
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TOMPKINS, ROGER, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8200 SHADETREE CT
 City JACKSONVILLE State FL Zip Code 32256-7153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384256
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TOMPKINS, ROGER, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8200 SHADETREE CT
 City JACKSONVILLE State FL Zip Code 32256-7153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422798
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4877 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TONON, LUCIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5301 SUNNINGDALE DR
 City CHARLOTTE State NC Zip Code 28277-2681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406145
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TOOLE, PATRICK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 HARBORVIEW ROAD
 City WESTPORT State CT Zip Code 06880-5061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373605
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TOONE, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15327 184TH PL NE
 City WOODINVILLE State WA Zip Code 98072-6326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352050
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4878 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOP, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 GALLOWAY RIDGE
 APT J311
 City PITTSBORO State NC Zip Code 27312-5522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381203
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TOPHAN, KATHIE, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19800 VERONICA DRIVE
 City SARATOGA State CA Zip Code 95070-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.343880
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

C. TOPHAN, KATHIE, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19800 VERONICA DRIVE
 City SARATOGA State CA Zip Code 95070-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.401631
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4879 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOPITZES, N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1750 CAMELOT DRIVE
 City MADISON State WI Zip Code 53705-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361936
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TORREY, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 366
 City ELBA State NY Zip Code 14058-0366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TORREY FARMS INC Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379411
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. TORREY, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 366
 City ELBA State NY Zip Code 14058-0366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TORREY FARMS INC Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379440
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4880 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TOWERSEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2979 COLTON ROAD
 City PEBBLE BEACH State CA Zip Code 93953-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.362849
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TOWERSEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2979 COLTON ROAD
 City PEBBLE BEACH State CA Zip Code 93953-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.411556
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TOZZI, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 LEE AVENUE
 City YONKERS State NY Zip Code 10705-2717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JPMORGAN CHASE Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 10 / 2016**
Transaction ID : SA11A.365165
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4881 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TRACEY, JAMES, , ,

Mailing Address **203 COSTA BELLA DR.**

City **AUSTIN** State **TX** Zip Code **78734-2662**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **GREAT STUFF ,INC** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
07 / 28 / 2016
Transaction ID : SA11A.358495

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TRACEY, JAMES, , ,

Mailing Address **203 COSTA BELLA DR.**

City **AUSTIN** State **TX** Zip Code **78734-2662**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **GREAT STUFF ,INC** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
07 / 28 / 2016
Transaction ID : SA11A.358498

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRACEY, RICHARD, D., MR.,

Mailing Address **16 MURRAY HILL DRIVE**

City **BLUFFTON** State **SC** Zip Code **29909-6136**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt
07 / 28 / 2016
Transaction ID : SA11A.357521

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **2025.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4882 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TRACEY, RICHARD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 MURRAY HILL DRIVE
 City BLUFFTON State SC Zip Code 29909-6136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361996
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TRACEY, RICHARD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 MURRAY HILL DRIVE
 City BLUFFTON State SC Zip Code 29909-6136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382713
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TRACEY, RICHARD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 MURRAY HILL DRIVE
 City BLUFFTON State SC Zip Code 29909-6136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413075
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4883 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. TRACY, MITCHELL, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8412 TALLY HO ROAD

City LUTHERVILLE TIMONI	State MD	Zip Code 21093-4724
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RISK & REGULATORY CONSULTING	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016
Transaction ID : SA11A.364271

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. TRACY, PATRICK, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5 ROCLARE LANE

City TOWN & COUNTRY	State MO	Zip Code 63131-1100
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016
Transaction ID : SA11A.392665

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. TRACY, WANDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1429 EAST LAKE SHORE DRIVE

City SPRINGFIELD	State IL	Zip Code 62712-5526
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2016
Transaction ID : SA11A.397176

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4884 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRACZ, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5270 COLERIDGE CT
 City CARLSBAD State CA Zip Code 92008-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.370880
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TRACZ, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5270 COLERIDGE CT
 City CARLSBAD State CA Zip Code 92008-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.422246
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TRACZ, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5270 COLERIDGE CT
 City CARLSBAD State CA Zip Code 92008-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : SA11A.422250
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4885 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRACZ, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5270 COLERIDGE CT
 City CARLSBAD State CA Zip Code 92008-4607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422261
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TRAMMELL, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3628 ROYAL TERN CR.
 City BOYNTON BEACH State FL Zip Code 33436-5430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418427
 Amount of Each Receipt this Period
 350.00
 Memo Item
 CONTRIBUTION

C. TRAUGER, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4306 ROBERTSON BOULEVARD
 City ALEXANDRIA State VA Zip Code 22309-3215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NATIONAL ASSOC OF MANUFACTUR Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.402087
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4886 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAU, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6767 SW WINDING WAY
 City CORVALLIS State OR Zip Code 97333-2610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRUAX CORP Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354221
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. TRAVIS, BETTY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 DOGWOOD AVE
 City GROTTUES State VA Zip Code 24441-2143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346972
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. TRAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8519 DELAVAN AVE
 City AUSTIN State TX Zip Code 78717-5406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF TEXAS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388055
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4887 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8519 DELAVAN AVE
 City AUSTIN State TX Zip Code 78717-5406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF TEXAS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11A.388058
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. TRAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8519 DELAVAN AVE
 City AUSTIN State TX Zip Code 78717-5406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF TEXAS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.408718
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TRAVIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8519 DELAVAN AVE
 City AUSTIN State TX Zip Code 78717-5406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF TEXAS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 25 / 2016
Transaction ID : SA11A.408719
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4888 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAYLOR, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2534 W. 33RD. ST. S.
 City WICHITA State KS Zip Code 67217-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLAME SPRAY REPAIR BY BONE LLC Occupation (for Individual) OWNER/MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382262
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TREADWELL, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3780 CRACKER WAY
 City GROSSE ILE State FL Zip Code 34134-8628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349244
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TREADWELL, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3780 CRACKER WAY
 City GROSSE ILE State FL Zip Code 34134-8628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396745
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4889 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3780 CRACKER WAY
City GROSSE ILE State FL Zip Code 34134-8628
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396746
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3780 CRACKER WAY
City GROSSE ILE State FL Zip Code 34134-8628
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398804
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3780 CRACKER WAY
City GROSSE ILE State FL Zip Code 34134-8628
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398805
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4890 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City GROSSE ILE State FL Zip Code 34134-8628

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400918

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

B. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City GROSSE ILE State FL Zip Code 34134-8628

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405890

Amount of Each Receipt this Period 25.00

Memo Item CONTRIBUTION

C. TREADWELL, MONICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3780 CRACKER WAY

City GROSSE ILE State FL Zip Code 34134-8628

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405958

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4891 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TREADWELL, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3780 CRACKER WAY
 City GROSSE ILE State FL Zip Code 34134-8628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407915
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TREADWELL, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3780 CRACKER WAY
 City GROSSE ILE State FL Zip Code 34134-8628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.412991
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TREADWAY, WILTON, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 WESTBROOK CIRCLE
 City LITTLE ROCK State AR Zip Code 72205-2259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357911
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4892 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TREADWAY, WILTON, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 WESTBROOK CIRCLE

City LITTLE ROCK	State AR	Zip Code 72205-2259
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.373558

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. TREADWAY, WILTON, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 WESTBROOK CIRCLE

City LITTLE ROCK	State AR	Zip Code 72205-2259
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.401760

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. TREGONING, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 63 ELMHURST RD

City NEWTON	State MA	Zip Code 02458-2232
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BIOGEN	Occupation (for Individual) CORPORATE AFFAIRS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.420184

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4893 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRENT, CARLA, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 CHESTNUT HILL COURT
APT16

City THOUSAND OAKS State CA Zip Code 91360-3893

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2016

Transaction ID : SA11A.361174

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. TRENT, CARLA, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 CHESTNUT HILL COURT
APT16

City THOUSAND OAKS State CA Zip Code 91360-3893

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.370984

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. TRESSLER, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 ROSEMARY COURT

City YORKTOWN HEIGHTS State NY Zip Code 10598-6342

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PFIZER Occupation (for Individual) PHYSICIAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.385919

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	435.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4894 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRESSLER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROSEMARY COURT
 City YORKTOWN HEIGHTS State NY Zip Code 10598-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402375
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TRESSLER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROSEMARY COURT
 City YORKTOWN HEIGHTS State NY Zip Code 10598-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402377
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TRIBLE, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 LAWSON LANE
 City MCLEAN State VA Zip Code 22101-3639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRIBLE'S, INC. Occupation (for Individual) WHOLESALER-DISTRIBUTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414528
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4895 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRICOLLI, JAMES, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 GREAT SPRINGS RD
 City BRYN MAWR State PA Zip Code 19010-1704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RBC Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398486
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. TRIFTSHAUSER, ROGER, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 EAGLE RUN DR
 City SANIBEL State FL Zip Code 33957-6709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVAL RESERVE DENTAL CORPS Occupation (for Individual) REAR ADMIRAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383556
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TRIPI, JOSEPH, C., , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 LOCKWOOD LN
 City ORCHARD PARK State NY Zip Code 14127-2713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRIPI FOODS INC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383539
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4896 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRIPLETT, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20805 W. 91ST TERRACE

City LENEXA	State KS	Zip Code 66220-3444
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UMB BANK	Occupation (for Individual) CHAIRMAN, HEALTHCARE SERVICE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350422

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. TRISCARI, ANTONIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1159 MARAVILLA CIRCLE

City CORONA	State CA	Zip Code 92881-5913
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : SA11A.366193

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. TRIVITT, ANNIE, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 42

City STUART	State OK	Zip Code 74570-0042
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

Transaction ID : SA11A.346817

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4897 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TRIVITT, ANNIE, F., ,

Mailing Address PO BOX 42

City STUART State OK Zip Code 74570-0042

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11A.364337

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TRIVITT, ANNIE, F., ,

Mailing Address PO BOX 42

City STUART State OK Zip Code 74570-0042

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11A.365997

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TRIVITT, ANNIE, F., ,

Mailing Address PO BOX 42

City STUART State OK Zip Code 74570-0042

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016

Transaction ID : SA11A.395922

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4898 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRIVITT, ANNIE, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 42
 City STUART State OK Zip Code 74570-0042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.406514
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TROESH, CAROL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 OLYMPIC HILLS CIRCLE
 City LAS VEGAS State NV Zip Code 89141-6046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016
Transaction ID : SA11A.346487
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

C. TROESH, DENNIS, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1370 JET STREAM DR STE 100
 City HENDERSON State NV Zip Code 89052-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016
Transaction ID : SA11A.346486
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4899 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TROTH, ROBERT, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 GULF SHORE BOULEVARD N
 APT 301
 City NAPLES State FL Zip Code 34103-3912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385966
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TROTH, ROBERT, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 GULF SHORE BOULEVARD N
 APT 301
 City NAPLES State FL Zip Code 34103-3912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389470
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TROTTER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1016 MOPAC CIRCLE
 STE 102
 City AUSTIN State TX Zip Code 78746-6810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.414950
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4900 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TROTTER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 CAMPUS BLVD
 City NEWTOWN SQUARE State PA Zip Code 19073-3229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CFG Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.356479
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. TROTTER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 CAMPUS BLVD
 City NEWTOWN SQUARE State PA Zip Code 19073-3229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CFG Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366709
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. TROTTER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 CAMPUS BLVD
 City NEWTOWN SQUARE State PA Zip Code 19073-3229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CFG Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372857
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4901 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TROWBRIDGE , DANIEL , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1830 AVENIDA DEL MUNDO, 1111
 City CORONADO State CA Zip Code 92118-4022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 28 / 2016**
Transaction ID : SA11A.382617
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TROWBRIDGE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3138 ANTLER COURT
 City PARK CITY State UT Zip Code 84098-6295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 14 / 2016**
Transaction ID : SA11A.394657
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. TROXELL, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3603 BRIDGER DR. SOUTH
 City CARMEL State IN Zip Code 46033-4155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDCONTINENT ISO Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.385212
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4902 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRUEMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5490 HAYDEN RUN ROAD
 City HILLIARD State OH Zip Code 43026-7789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392753
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. TRUMO, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 3RD AVENUE S UNIT 2402
 City MINNEAPOLIS State MN Zip Code 55401-2720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383522
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. TRYCZYNSKI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S29W31820 ROBERTS RD
 City WAUKESHA State WI Zip Code 53188-9114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357234
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4903 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRYCZYNSKI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S29W31820 ROBERTS RD
 City WAUKESHA State WI Zip Code 53188-9114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363857
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TRYCZYNSKI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S29W31820 ROBERTS RD
 City WAUKESHA State WI Zip Code 53188-9114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384396
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TRYTTEN, GROVER, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 BRANDING IRON COVE
 City GEORGETOWN State TX Zip Code 78633-4884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364763
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4904 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRYTTEN, GROVER, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 BRANDING IRON COVE
 City GEORGETOWN State TX Zip Code 78633-4884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397024
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. TRYTTEN, GROVER, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 BRANDING IRON COVE
 City GEORGETOWN State TX Zip Code 78633-4884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402563
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TRZCINSKI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 CORPORATE CIRCLE
 City NORTH ROYALTON State OH Zip Code 44133-1280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.380179
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4905 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TSANG, JANIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLER WILLIAMS REALTY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350975

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. TSANG, JANIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLER WILLIAMS REALTY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374714

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. TSANG, JANIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLER WILLIAMS REALTY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380541

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4906 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TSANG, JANIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7 BENJAMIN ROAD

City LEXINGTON	State MA	Zip Code 02421-8005
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLER WILLIAMS REALTY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399737

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. TSHIBAKA, PRISCILLA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10806 PERRIN CIRCLE

City SPOTSYLVANIA	State VA	Zip Code 22551-4621
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417293

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TSOU, SCHUMARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8101 SAPPHIRE BAY CIRCLE

City LAS VEGAS	State NV	Zip Code 89128-7738
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.349774

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4907 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TSOU, SCHUMARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8101 SAPPHIRE BAY CIRCLE
 City LAS VEGAS State NV Zip Code 89128-7738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372711
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. TSOU, SCHUMARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8101 SAPPHIRE BAY CIRCLE
 City LAS VEGAS State NV Zip Code 89128-7738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 18 / 2016
Transaction ID : SA11A.399865
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 07 / 28 / 2016
Transaction ID : SA11A.357627
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4908 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.358494
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2016
Transaction ID : SA11A.385188
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. TUCKER, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3746 SCARLET OAK
 City CORPUS CHRISTI State TX Zip Code 78418-9127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONLINE DIRECTIONAL Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413004
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4909 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUCKER, DONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 W HALBERT RD
 City BETHESDA State MD Zip Code 20817-5468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354622
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TUCKER, DONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 W HALBERT RD
 City BETHESDA State MD Zip Code 20817-5468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354623
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. TUCKER, DONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 W HALBERT RD
 City BETHESDA State MD Zip Code 20817-5468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377418
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4910 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUCKER, DONALD, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6406 W HALBERT RD
 City BETHESDA State MD Zip Code 20817-5468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405128
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. TUCKER, TERRY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 COUNTRY CLUB DR. E.
 City WARSAW State IN Zip Code 46580-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAPLE LEAF FARMS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401535
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TUCKY, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9817 CATEBURY ROSE LANE
 City LAS VEGAS State NV Zip Code 89134-5913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MGM RESORTS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400394
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4911 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TULLOS, CASSELL, B., ,

Mailing Address 1059 HIGHWAY 43

City COLUMBIA State MS Zip Code 39429-8459

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394922

Amount of Each Receipt this Period
10400.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TULLOCH, WALTER, , ,

Mailing Address 2088 MOTHER GRUNDY TRUCK TRAIL

City JAMUL State CA Zip Code 91935-7818

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATKINS Occupation (for Individual) PROGRAM MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396917

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TULLOCH, WALTER, , ,

Mailing Address 2088 MOTHER GRUNDY TRUCK TRAIL

City JAMUL State CA Zip Code 91935-7818

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATKINS Occupation (for Individual) PROGRAM MANAGER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.408788

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 11150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4912 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUNNELL, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 WOODVIEW TERRACE

City DENISON	State TX	Zip Code 75020-8226
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347376

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. TUNNELL, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 WOODVIEW TERRACE

City DENISON	State TX	Zip Code 75020-8226
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355506

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. TUNNELL, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 WOODVIEW TERRACE

City DENISON	State TX	Zip Code 75020-8226
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357216

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4913 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUNNELL, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 WOODVIEW TERRACE
 City DENISON State TX Zip Code 75020-8226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404665
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. TUNNELL, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 WOODVIEW TERRACE
 City DENISON State TX Zip Code 75020-8226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404671
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. TUOHEY, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 SALEM RD
 City LONGMEADOW State MA Zip Code 01106-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE COLLINS COMPANIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350463
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4914 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUOHY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CROCUS LANE N OAKS

City ST. PAUL	State MN	Zip Code 55127-6302
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.380992

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. TURBA, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 203 OAK HILL DR NE

City BROOKHAVEN	State MS	Zip Code 39601-3692
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SA11A.361898

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. TURBA, DIANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 203 OAK HILL DR NE

City BROOKHAVEN	State MS	Zip Code 39601-3692
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2016

Transaction ID : SA11A.366875

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4915 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TURBA, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 OAK HILL DR NE
 City BROOKHAVEN State MS Zip Code 39601-3692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392068
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TURCOTTE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PUTNAM DR. NW
 City ATLANTA State GA Zip Code 30342-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351917
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TURCOTTE, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PUTNAM DR. NW
 City ATLANTA State GA Zip Code 30342-4412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351918
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4916 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUREK, GEORGE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 N TRANQUIL PATH
 City THE WOODLANDS State TX Zip Code 77380-2756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VETERANS EVALUATION SERVICES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 57500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391526
 Amount of Each Receipt this Period 32500.00
 Memo Item CONTRIBUTION

B. TUREK, LINDA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 N TRANQUIL PATH
 City THE WOODLANDS State TX Zip Code 77380-2756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MES GROUP INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 42500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.391525
 Amount of Each Receipt this Period 32500.00
 Memo Item CONTRIBUTION

C. TURNER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4500 LORAIN AVE
 City DALLAS State TX Zip Code 75205-3613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402994
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 65500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4917 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TURNER, THOMAS, , ,

Mailing Address **848 CENTRAL DR**

City **ODESSA** State **TX** Zip Code **79761-4202**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **TURNER EYE CLINIC** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1017.00**

Date of Receipt
07 / 30 / 2016
Transaction ID : SA11A.359848

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TURNER, THOMAS, , ,

Mailing Address **848 CENTRAL DR**

City **ODESSA** State **TX** Zip Code **79761-4202**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **TURNER EYE CLINIC** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1017.00**

Date of Receipt
08 / 30 / 2016
Transaction ID : SA11A.384788

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TURNER, THOMAS, , ,

Mailing Address **848 CENTRAL DR**

City **ODESSA** State **TX** Zip Code **79761-4202**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **TURNER EYE CLINIC** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1017.00**

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.419600

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **393.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4918 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TUSSING, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 MORLEYCT

City FAIRFAX	State VA	Zip Code 22032-3917
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USFALCON	Occupation (for Individual) COO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.405009

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. TWIFORD, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1755 COLONIAL MANOR DRIVE

City LANCASTER	State PA	Zip Code 17603-6033
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.347783

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TWILLA, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 10964

City MURFREESBORO	State TN	Zip Code 37129-0020
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.356647

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4919 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TWILLA, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 10964

City MURFREESBORO	State TN	Zip Code 37129-0020
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11A.361520

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. TYERMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3791

City IN LINE VILLAGE	State NV	Zip Code 89450-3791
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353869

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TYERMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3791

City IN LINE VILLAGE	State NV	Zip Code 89450-3791
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390195

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4920 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYERMAN, VERNON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3791
 City IN LINE VILLAGE State NV Zip Code 89450-3791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397574
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TYNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 FAXON STREET
 City FOXBORO State MA Zip Code 02035-2761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YWCA BBOSTON, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359947
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TYNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 FAXON STREET
 City FOXBORO State MA Zip Code 02035-2761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YWCA BBOSTON, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372353
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4921 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 FAXON STREET
 City FOXBORO State MA Zip Code 02035-2761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YWCA BBOSTON, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384795
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TYNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 FAXON STREET
 City FOXBORO State MA Zip Code 02035-2761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YWCA BBOSTON, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399831
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. TYNAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 FAXON STREET
 City FOXBORO State MA Zip Code 02035-2761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YWCA BBOSTON, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419602
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4922 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYROCH, HENRY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7400 CLAREWOOD DRIVE
 APT 724
 City HOUSTON State TX Zip Code 77036-4340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414469
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TYRRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6688 COUNTY RD 12
 City NAPLES State NY Zip Code 14512-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.362085
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TYRRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6688 COUNTY RD 12
 City NAPLES State NY Zip Code 14512-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368705
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4923 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYRRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6688 COUNTY RD 12
 City NAPLES State NY Zip Code 14512-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405821
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. TYRRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6688 COUNTY RD 12
 City NAPLES State NY Zip Code 14512-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405824
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. TYRRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6688 COUNTY RD 12
 City NAPLES State NY Zip Code 14512-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405839
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4924 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TYRRELL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6688 COUNTY RD 12
 City NAPLES State NY Zip Code 14512-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405840
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. TZETZO, NICHOLAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 491 DELAWARE AVE
 City BUFFALO State NY Zip Code 14202-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.402090
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. UDELHOVEN, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 126
 City KASILOF State AK Zip Code 99610-0126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UDELOVEN OUTFIELD SYST Occupation (for Individual) C.E.O.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381271
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4925 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UHLMANN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E BELLA VISTA DR
 City SCOTTSDALE State AZ Zip Code 85259-5813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 07 / 2016**
Transaction ID : SA11A.345956
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. UHLMANN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E BELLA VISTA DR
 City SCOTTSDALE State AZ Zip Code 85259-5813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 07 / 2016**
Transaction ID : SA11A.363305
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. UHLMANN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11401 E BELLA VISTA DR
 City SCOTTSDALE State AZ Zip Code 85259-5813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391005
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4926 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UIHLEIN, LUCIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 715 LANDS END DRIVE

City LONGBOAT KEY	State FL	Zip Code 34228-1055
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.352663

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. UIHLEIN, LUCIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 715 LANDS END DRIVE

City LONGBOAT KEY	State FL	Zip Code 34228-1055
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419021

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. UIHLEIN, MARGERY, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1210 W ESTATES DR.

City MEQUON	State WI	Zip Code 53092-8553
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391335

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4927 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ULRICH, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11553 LUCASVILLE ROAD
 City MANASSAS State VA Zip Code 20112-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) QUALITY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388501
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ULRICH, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11553 LUCASVILLE ROAD
 City MANASSAS State VA Zip Code 20112-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) QUALITY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403219
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ULRICH, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11553 LUCASVILLE ROAD
 City MANASSAS State VA Zip Code 20112-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) QUALITY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.413896
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4928 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ULRICH, GERARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11553 LUCASVILLE ROAD

City MANASSAS	State VA	Zip Code 20112-4422
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LOCKHEED MARTIN	Occupation (for Individual) QUALITY ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.423019

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ULRICH, JEAN, E., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1372 LUTHER LANE

City ARLINGTON HEIGHTS	State IL	Zip Code 60004-8101
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.354102

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. ULRICH, JEAN, E., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1372 LUTHER LANE

City ARLINGTON HEIGHTS	State IL	Zip Code 60004-8101
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417095

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4929 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UNGER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 OAK LANE
 City GETTYSBURG State PA Zip Code 17325-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394501
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. UNGER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 OAK LANE
 City GETTYSBURG State PA Zip Code 17325-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394503
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. UNGER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 OAK LANE
 City GETTYSBURG State PA Zip Code 17325-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410370
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4930 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UNGER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 OAK LANE
 City GETTYSBURG State PA Zip Code 17325-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410371
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. UNNERSTALL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20900 SPARTA LANE
 City OLYMPIA FIELDS State IL Zip Code 60461-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373684
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. UNRUH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5426 E MORRISON LANE
 City PARADISE VALLEY State AZ Zip Code 85253-3017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERION CAPTIAL GROUP LLC Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366190
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4931 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UPCHURCH, LANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2923 VININGS FOREST WAY SE

City ATALNTA	State GA	Zip Code 30339-4223
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.377004

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. URBANAS, GARY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 BALTIMORE STREET
APT 2

City GETTYSBURG	State PA	Zip Code 17325-2627
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2016

Transaction ID : SA11A.361380

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. URBANAS, GARY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 BALTIMORE STREET
APT 2

City GETTYSBURG	State PA	Zip Code 17325-2627
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364488

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4932 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. URBANAS, GARY, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 BALTIMORE STREET
APT 2

City GETTYSBURG State PA Zip Code 17325-2627

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) TEACHER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt **08 / 23 / 2016**

Transaction ID : SA11A.377180

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

B. URQUHART, GLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2105 LAVERS CIRCLE #204

City DELRAY BEACH State FL Zip Code 33444-7635

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) APPOQUINIMINK SCHOOL DISTRICT Occupation (for Individual) SCHOOL BOARD MEMBER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 29 / 2016**

Transaction ID : SA11A.415944

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. URSTADT, ELINOR, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 BEECHWOOD ROAD

City BRONXVILLE State NY Zip Code 10708-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 24 / 2016**

Transaction ID : SA11A.354587

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4933 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. URSTADT, ELINOR, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 BEECHWOOD ROAD
 City BRONXVILLE State NY Zip Code 10708-3202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.379076
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. URSTADT, ELINOR, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 BEECHWOOD ROAD
 City BRONXVILLE State NY Zip Code 10708-3202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2016
Transaction ID : SA11A.409028
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. UTZINGER, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 700469
 City OOSTBURG State WI Zip Code 53070-0469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354601
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4934 OF 5722 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. UTZINGER, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 700469
 City OOSTBURG State WI Zip Code 53070-0469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.404962
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VAAGEN, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 DUBOIS RD
 City COLVILLE State WA Zip Code 99114-9255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAAGEN BROS. LUMBER Occupation (for Individual) EXECTUVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.367931
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

C. VACCO, DENNIS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6420 HILLCROFT DR
 City BOSTON State NY Zip Code 14025-9709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUPPES MATIAS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385225
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	16050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4935 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAHER, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9217 EGRET RIDGE

City BELMONT	State NC	Zip Code 28012-7636
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.401738

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. VALCOURT, JEFFERY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 852 ALVERMAR RIDGE DRIVE

City MCLEAN	State VA	Zip Code 22102-1435
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VALCOURT BUILDING SERVICES	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.361124

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. VALLAR, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1530 LONDON RAOD

City CHARLOTTESVILLE	State VA	Zip Code 22901-8880
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GUARD HILL ADVISORS	Occupation (for Individual) INVESTMENT ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : SA11A.387908

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4936 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VALLAR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1530 LONDON RAOD
 City CHARLOTTESVILLE State VA Zip Code 22901-8880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUARD HILL ADVISORS Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403811
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. VALLAR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1530 LONDON RAOD
 City CHARLOTTESVILLE State VA Zip Code 22901-8880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUARD HILL ADVISORS Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403835
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. VALLAR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1530 LONDON RAOD
 City CHARLOTTESVILLE State VA Zip Code 22901-8880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUARD HILL ADVISORS Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.403836
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4937 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VALLIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 7TH AVE
 City LA GRANGE State IL Zip Code 60525-6706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IPS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372346
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. VAN ARSDALE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13722 MILTON AVE
 City WESTMINSTER State CA Zip Code 92683-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTRY CITY TOWING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385814
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VAN ARSDALE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13722 MILTON AVE
 City WESTMINSTER State CA Zip Code 92683-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTRY CITY TOWING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404897
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4938 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN ARSDALE, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13722 MILTON AVE
 City WESTMINSTER State CA Zip Code 92683-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTRY CITY TOWING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404910
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAN ALLEN, RICHARD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7318 INVERNESS LN SE
 City SNOQUALMIE State WA Zip Code 98065-9099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VAN ALLEN, RICHARD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7318 INVERNESS LN SE
 City SNOQUALMIE State WA Zip Code 98065-9099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394021
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4939 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN ALLEN, RICHARD, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7318 INVERNESS LN SE

City SNOQUALMIE	State WA	Zip Code 98065-9099
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414113

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. VAN BOXTEL, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5023 ADDICKS SATSUMA STE. L SUITE L

City HOUSTON	State TX	Zip Code 77084-6075
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362496

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VAN BOXTEL, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5023 ADDICKS SATSUMA STE. L SUITE L

City HOUSTON	State TX	Zip Code 77084-6075
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378951

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4940 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN BOXTEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 ADDICKS SATSUMA STE. L
 SUITE L
 City HOUSTON State TX Zip Code 77084-6075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.408087
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. VAN BOXTEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 ADDICKS SATSUMA STE. L
 SUITE L
 City HOUSTON State TX Zip Code 77084-6075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409909
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. VAN COVERN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 COPPERLEAF DR
 City THE WOODLANDS State TX Zip Code 77381-5167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370885
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4941 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN COVERN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 COPPERLEAF DR
 City THE WOODLANDS State TX Zip Code 77381-5167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380053
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VAN DE RIET, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4214 ASHWICK TERRACE
 City SAINT LOUIS State MO Zip Code 63128-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359352
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VAN GRONINGEN, PAT, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15176 JACK TONE ROAD
 City MANTECA State CA Zip Code 95336-9729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.351832
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4942 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. VAN HEUKELOM, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 2550 DEER LANE ROAD		Transaction ID : SA11A.373030
City MARION	State IA	Zip Code 52302-9603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. VAN HEUKELOM, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 2550 DEER LANE ROAD		Transaction ID : SA11A.373032
City MARION	State IA	Zip Code 52302-9603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. VAN HEUKELOM, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2016
Mailing Address 2550 DEER LANE ROAD		Transaction ID : SA11A.373040
City MARION	State IA	Zip Code 52302-9603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4943 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN HEUKELOM, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 DEER LANE ROAD
 City MARION State IA Zip Code 52302-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373041
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VAN HORN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 W. MISTY MORNING TRACE
 City THE WOODLANDS State TX Zip Code 77381-3859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENCE RESOURCES MANAGEMENT, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412218
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VAN HOESEN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2950 SHERWOOD COURT
 City MUSKEGON State MI Zip Code 49441-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388833
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4944 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN HOUTEN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19508 COUNTY ROAD 95
 City WOODLAND State CA Zip Code 95695-9361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392945
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. VAN HORN, V, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 GLECOVE STREET
 City HOUSTON State TX Zip Code 77007-7008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.381186
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VAN INGEN, JOHN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 PALACE AVE.
 City ST. PAUL State MN Zip Code 55105-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ST. THOMAS Occupation (for Individual) COLLEGE PROFESSOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.344526
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1309.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4945 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN INGEN, JOHN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 PALACE AVE.
 City ST. PAUL State MN Zip Code 55105-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ST. THOMAS Occupation (for Individual) COLLEGE PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383584
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VAN INGEN, JOHN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 PALACE AVE.
 City ST. PAUL State MN Zip Code 55105-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF ST. THOMAS Occupation (for Individual) COLLEGE PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400777
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VAN KIRK, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 GREEN LANE
 City HAVERFORD State PA Zip Code 19041-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 20 / 2016
Transaction ID : SA11A.376039
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4946 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN MAREN, AL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19860 LEMBCKE ROAD

City HARVARD	State IL	Zip Code 60033-9653
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2016

Transaction ID : SA11A.353666

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. VAN MAREN, AL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19860 LEMBCKE ROAD

City HARVARD	State IL	Zip Code 60033-9653
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.409220

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VAN MAREN, AL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19860 LEMBCKE ROAD

City HARVARD	State IL	Zip Code 60033-9653
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2016

Transaction ID : SA11A.409221

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4947 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN MAREN, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19860 LEMBCKE ROAD
 City HARVARD State IL Zip Code 60033-9653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409222
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAN METER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1234 WEST PALM AVE
 City REDLANDS State CA Zip Code 92373-5753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387320
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. VAN METER, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1234 WEST PALM AVE
 City REDLANDS State CA Zip Code 92373-5753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414055
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4948 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN SLOOTEN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 354 5TH AVENUE
 City HOLLAND State MI Zip Code 49424-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358076
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. VAN WART, DONALD, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24655 SW BRENTWOOD DRIVE
 City WEST LINN State OR Zip Code 97068-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348683
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VAN WART, DONALD, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24655 SW BRENTWOOD DRIVE
 City WEST LINN State OR Zip Code 97068-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359858
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	214.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4949 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN WART, DONALD, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24655 SW BRENTWOOD DRIVE
 City WEST LINN State OR Zip Code 97068-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386349
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAN WART, DONALD, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24655 SW BRENTWOOD DRIVE
 City WEST LINN State OR Zip Code 97068-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386358
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VAN WART, DONALD, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24655 SW BRENTWOOD DRIVE
 City WEST LINN State OR Zip Code 97068-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386359
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4950 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VAN WART, DONALD, T., MR.,
 Mailing Address 24655 SW BRENTWOOD DRIVE
 City WEST LINN State OR Zip Code 97068-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 777.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402941
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VAN WYK, MAX, , ,
 Mailing Address 2616 GREENTREE DRIVE SE
 City GRAND RAPIDS State MI Zip Code 49546-5527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN WYK LLC Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374367
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VAN WOENSEL, PAUL, A., ,
 Mailing Address 34500 SLEEPING FOX TRAIL
 City EVERGREEN State CO Zip Code 80439-9619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPWI Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.343886
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4951 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAN WEELDEN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2270 N 61ST STREET
 City WAUWATOSA State WI Zip Code 53213-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGOOD CONSTRUCTION LLC Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401265
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAN WEELDEN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2270 N 61ST STREET
 City WAUWATOSA State WI Zip Code 53213-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGOOD CONSTRUCTION LLC Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401266
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VANBROCKLIN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6270 MERION LN
 City GRAND BLANC State MI Zip Code 48439-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408543
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4952 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANBROCKLIN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6270 MERION LN
 City GRAND BLANC State MI Zip Code 48439-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408545
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VANBROCKLIN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6270 MERION LN
 City GRAND BLANC State MI Zip Code 48439-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419123
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VANCE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4112 TUFTON
 City WILLIAMSBURG State VA Zip Code 23188-2799
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383528
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4953 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. VANDERHOVEN, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 531697
 City HENDERSON State NV Zip Code 89053-1697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIQUE COMMUNICATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VANDELLEN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24479 N 120TH PLACE
 City SCOTTSDALE State AZ Zip Code 85255-5960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392429
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. VANDER PLOEG, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13411 APPLE TREE RD
 City HOUSTON State TX Zip Code 77079-7109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHIEFTAIN EXPLORATION COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361972
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4954 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANDER PLOEG, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13411 APPLE TREE RD
 City HOUSTON State TX Zip Code 77079-7109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHIEFTAIN EXPLORATION COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390538
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

B. VANDER PLOEG, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13411 APPLE TREE RD
 City HOUSTON State TX Zip Code 77079-7109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHIEFTAIN EXPLORATION COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390539
 Amount of Each Receipt this Period 20.00
 Memo Item
 CONTRIBUTION

C. VANDER PLOEG, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13411 APPLE TREE RD
 City HOUSTON State TX Zip Code 77079-7109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHIEFTAIN EXPLORATION COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390544
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4955 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANDER PLOEG, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13411 APPLE TREE RD
 City HOUSTON State TX Zip Code 77079-7109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHIEFTAIN EXPLORATION COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390545
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VANDEN BRINK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BOARDWALK PL.
 City PARK RIDGE State IL Zip Code 60068-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370241
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VANDEN BRINK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BOARDWALK PL.
 City PARK RIDGE State IL Zip Code 60068-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370243
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4956 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANDEN BRINK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BOARDWALK PL.
 City PARK RIDGE State IL Zip Code 60068-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412123
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VANDEN BRINK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 BOARDWALK PL.
 City PARK RIDGE State IL Zip Code 60068-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412124
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VANDERWEIL, RAIMUND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 JERUSALEM RD
 City COHASSET State MA Zip Code 02025-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VANDERWEIL ENGINEERS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382265
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4957 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. VANDER HEYDEN, WILLIAM, H., MR.,		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 12492 N ROYAL LN MEQUON		Transaction ID : SA11A.358344
City MEQUON	State WI	Zip Code 53092-8554
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. VANDER HEYDEN, WILLIAM, H., MR.,		Date of Receipt MM / DD / YYYY 07 / 31 / 2016
Mailing Address 12492 N ROYAL LN MEQUON		Transaction ID : SA11A.359568
City MEQUON	State WI	Zip Code 53092-8554
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. VANDER HEYDEN, WILLIAM, H., MR.,		Date of Receipt MM / DD / YYYY 08 / 16 / 2016
Mailing Address 12492 N ROYAL LN MEQUON		Transaction ID : SA11A.368686
City MEQUON	State WI	Zip Code 53092-8554
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4958 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANDER HEYDEN, WILLIAM, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12492 N ROYAL LN MEQUON
 City MEQUON State WI Zip Code 53092-8554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382483
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VANE III, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1713 PEBBLE BEACH DRIVE
 City VIENNA State VA Zip Code 22182-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US GOVERNMENT Occupation (for Individual) ACQUISITION PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390688
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VANE III, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1713 PEBBLE BEACH DRIVE
 City VIENNA State VA Zip Code 22182-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US GOVERNMENT Occupation (for Individual) ACQUISITION PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390690
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4959 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANE III, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1713 PEBBLE BEACH DRIVE

City VIENNA	State VA	Zip Code 22182-2335
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US GOVERNMENT	Occupation (for Individual) ACQUISITION PORTFOLIO MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.400977

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. VANE III, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1713 PEBBLE BEACH DRIVE

City VIENNA	State VA	Zip Code 22182-2335
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US GOVERNMENT	Occupation (for Individual) ACQUISITION PORTFOLIO MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.400978

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. VANEGMOND, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20439 OXNARD ST

City WOODLAND HILLS	State CA	Zip Code 91367-5429
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352569

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4960 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANEGMOND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20439 OXNARD ST
 City WOODLAND HILLS State CA Zip Code 91367-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397891
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. VANEGMOND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20439 OXNARD ST
 City WOODLAND HILLS State CA Zip Code 91367-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397905
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. VANEGMOND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20439 OXNARD ST
 City WOODLAND HILLS State CA Zip Code 91367-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397907
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 75.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4961 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANEGMOND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20439 OXNARD ST
 City WOODLAND HILLS State CA Zip Code 91367-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420291
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VANEGMOND, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20439 OXNARD ST
 City WOODLAND HILLS State CA Zip Code 91367-5429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420302
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VANVALKENBURG, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1124
 City PUEBLO State CO Zip Code 81002-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA PAIN MANAGEMENT Occupation (for Individual) NURSE ANESTHETIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358322
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4962 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VANVALKENBURG, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1124
 City PUEBLO State CO Zip Code 81002-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA PAIN MANAGEMENT Occupation (for Individual) NURSE ANESTHETIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.382459
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VANVALKENBURG, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1124
 City PUEBLO State CO Zip Code 81002-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANESTHESIA PAIN MANAGEMENT Occupation (for Individual) NURSE ANESTHETIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416130
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VARN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POWELL BOX 2726
 City HARTSVILLE State SC Zip Code 29551-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359856
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 4963 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VARN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address POWELL BOX 2726

City HARTSVILLE	State SC	Zip Code 29551-
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
MM / DD / YYYY
08 / 27 / 2016
Transaction ID : SA11A.382990

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. VARN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address POWELL BOX 2726

City HARTSVILLE	State SC	Zip Code 29551-
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016
Transaction ID : SA11A.418391

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VARNER, PAULA, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1515 N LINDEN COURT

City WICHITA	State KS	Zip Code 67206-
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016
Transaction ID : SA11A.364350

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4964 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VASQUEZ, MARCIA, J., ,

Mailing Address 2908 PUEBLO TSANKAWI

City SANTA FE State NM Zip Code 87507-2530

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) VOLUNTEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.382256

Amount of Each Receipt this Period
 25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VASQUEZ, MARCIA, J., ,

Mailing Address 2908 PUEBLO TSANKAWI

City SANTA FE State NM Zip Code 87507-2530

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) VOLUNTEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416954

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VASQUEZ, MARCIA, J., ,

Mailing Address 2908 PUEBLO TSANKAWI

City SANTA FE State NM Zip Code 87507-2530

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) VOLUNTEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.416955

Amount of Each Receipt this Period
 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4965 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VASQUEZ, MARCIA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2908 PUEBLO TSANKAWI
 City SANTA FE State NM Zip Code 87507-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423092
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VASQUEZ, MARCIA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2908 PUEBLO TSANKAWI
 City SANTA FE State NM Zip Code 87507-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423107
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VATCH, MICHAEL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 HAVEMEYER AVE
 City BRONX State NY Zip Code 10473-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SENIOR CARE EMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398469
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4966 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VAUGHAN, RICHARD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 458
 City WILSON State WY Zip Code 83014-0458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.375209
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VAZQUEZ-RODRIGUEZ, ISABELINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 SE 89TH TRE
 City OKLAHOMA CITY State OK Zip Code 73135-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354926
 Amount of Each Receipt this Period 60.00
 Memo Item CONTRIBUTION

C. VAZQUEZ-RODRIGUEZ, ISABELINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4100 SE 89TH TRE
 City OKLAHOMA CITY State OK Zip Code 73135-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376859
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4967 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VEAZEY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 RIDGE LAKE BLVD
 202
 City MEMPHIS State TN Zip Code 38120-9426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391981
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. VECCHIONE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5312 N WILKINS ROAD
 City PARADISE VALLEY State AZ Zip Code 85253-6969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2016
Transaction ID : SA11A.392525
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. VELAZQUEZ, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1790 SW 27 AVE
 City MIAMI State FL Zip Code 33145-2418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379963
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4968 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VELAZQUEZ, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1790 SW 27 AVE
 City MIAMI State FL Zip Code 33145-2418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386713
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. VELAZQUEZ, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1790 SW 27 AVE
 City MIAMI State FL Zip Code 33145-2418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403876
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VELDWYK, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5504 RAINIER AVENUE S
 City SEATTLE State WA Zip Code 98118-2441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364429
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4969 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VENEMA, MAYNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 SOMERSET LANE
 City NORTHFIELD State IL Zip Code 60093-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349625
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VENEMA, MAYNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 SOMERSET LANE
 City NORTHFIELD State IL Zip Code 60093-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368839
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VENEMA, MAYNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 SOMERSET LANE
 City NORTHFIELD State IL Zip Code 60093-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387413
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4970 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VENEMA, MAYNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 SOMERSET LANE
 City NORTHFIELD State IL Zip Code 60093-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403275
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VERDON JR MD , JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 OCEAN AVE 9 G
 City MONMOUTH BEACH State NJ Zip Code 07750-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.408975
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VERMILLION, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 EAST MISSION AVE
 City SPOKANE State WA Zip Code 99220-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVISTA CORP Occupation (for Individual) SENIOR VICE PREISDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367906
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4971 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

Transaction ID : SA11A.348837

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350427

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350428

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4972 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355550

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355550

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2016

Transaction ID : SA11A.376189

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4973 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382045

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382047

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.383176

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4974 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		30		2016

Transaction ID : SA11A.384216

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		06		2016

Transaction ID : SA11A.390500

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		13		2016

Transaction ID : SA11A.394077

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4975 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.400885

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403859

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407678

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4976 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407679

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. VERNACE, SALVADORE, J., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CINNAMON BARK LANE

City KEY LARGO	State FL	Zip Code 33037-5119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411519

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. VESSELS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79 RAILROAD PLACE
UNIT 101

City SARATOGA SPRINGS	State NY	Zip Code 12866-2163
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.381527

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4977 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VETTER, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3617 LARCHWOOD DRIVE
 City MINNETONKA State MN Zip Code 55345-1129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.375801
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VETTER, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3617 LARCHWOOD DRIVE
 City MINNETONKA State MN Zip Code 55345-1129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405029
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VICKERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 DRAKE LN
 City LONDON State KY Zip Code 40741-9751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359492
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4978 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VICKERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 DRAKE LN
 City LONDON State KY Zip Code 40741-9751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382535
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VICKERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 DRAKE LN
 City LONDON State KY Zip Code 40741-9751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422279
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VICKERS, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 ROCHELLE ST.
 City BRADY State TX Zip Code 76825-7746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363851
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4979 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VICKERS, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 ROCHELLE ST.
 City BRADY State TX Zip Code 76825-7746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 09 / 2016**
Transaction ID : SA11A.363853
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VICKERS, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 ROCHELLE ST.
 City BRADY State TX Zip Code 76825-7746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.415622
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VICTOREEN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10040 EAST HAPPY VALLEY ROAD UNIT 475
 City SCOTTSDALE State AZ Zip Code 85255-2390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391683
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4980 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VIERRA, FRED, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9041 RANCH RIVER CIR
 City HIGHLANDS RANCH State CO Zip Code 80126-5079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TELECOMMUNICATIONS INC. Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381569
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. VIGNES, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 PARKWAY DR
 City BETTENDORF State IA Zip Code 52722-3742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377092
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. VIGNES, CALVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1731 PARKWAY DR
 City BETTENDORF State IA Zip Code 52722-3742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405939
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4981 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VILLEGAS, PETER, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3196
 City RANCHO CUCAMONGA State CA Zip Code 91729-3196
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2016
Transaction ID : SA11A.345255
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. VINCENT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2680
 City VENTURA State CA Zip Code 93002-2680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 M&M MANAGEMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397924
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. VINCENT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2680
 City VENTURA State CA Zip Code 93002-2680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 M&M MANAGEMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397925
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4982 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VINTON, DRURY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LILY LANE
 City WEST LEBANON State NH Zip Code 03784-1052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.406067
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. VINTON, DRURY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LILY LANE
 City WEST LEBANON State NH Zip Code 03784-1052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411654
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VINTON, DRURY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 LILY LANE
 City WEST LEBANON State NH Zip Code 03784-1052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.411655
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4983 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VINTON, DRURY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 34 LILY LANE

City WEST LEBANON	State NH	Zip Code 03784-1052
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422701

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. VIRKLER, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6919 ANCIENT OAK LANE

City CHARLOTTE	State NC	Zip Code 28277-0359
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359710

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. VIRKLER, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6919 ANCIENT OAK LANE

City CHARLOTTE	State NC	Zip Code 28277-0359
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386888

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4984 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VIRKLER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6919 ANCIENT OAK LANE
 City CHARLOTTE State NC Zip Code 28277-0359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419591
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. VISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1736 AIDENN LAIR
 City DRESHER State PA Zip Code 19025-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.385063
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. VISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1736 AIDENN LAIR
 City DRESHER State PA Zip Code 19025-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397864
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4985 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VISS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1736 AIDENN LAIR
 City DRESHER State PA Zip Code 19025-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397866
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. VITALE, ALBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 GRACE TRAIL
 City PALM BEACH State FL Zip Code 33480-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.369186
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. VOELL, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13611 DEERING BAY DRIVE, APT 1101
 City CORAL GABLES State FL Zip Code 33158-2843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.348168
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4986 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOELL, RICHARD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13611 DEERING BAY DRIVE, APT 1101
 City CORAL GABLES State FL Zip Code 33158-2843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414754
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. VOGEL, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 HENDRICKS ISLE APT 203
 City FORT LAUDERDALE State FL Zip Code 33301-3877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366502
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. VOGT, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5635 TOWERS ST.
 City TORRANCE State CA Zip Code 90503-1160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400743
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4987 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOGT, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5635 TOWERS ST.

City TORRANCE	State CA	Zip Code 90503-1160
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAYTHEON	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413778

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. VOGT, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5635 TOWERS ST.

City TORRANCE	State CA	Zip Code 90503-1160
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAYTHEON	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.413788

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. VOGTLE, JESSE, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3640 OAKDALE ROAD

City BIRMINGHAM	State AL	Zip Code 35223-1463
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.389819

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4988 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOIGT, REBECCA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2175 WINDING OAK TRAIL

City ADA	State MI	Zip Code 49301-8656
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TARGET	Occupation (for Individual) PHARMACIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422264

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. VOIGT, REBECCA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2175 WINDING OAK TRAIL

City ADA	State MI	Zip Code 49301-8656
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TARGET	Occupation (for Individual) PHARMACIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.422265

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. VOLK, INGRID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 UPHILL LN

City LOUISBURG	State NC	Zip Code 27549-9420
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359394

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4989 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOLK, INGRID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 UPHILL LN
 City LOUISBURG State NC Zip Code 27549-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386934
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. VOLK, INGRID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 UPHILL LN
 City LOUISBURG State NC Zip Code 27549-9420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419413
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. VOLKERT , DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25621 AMBER LEAF ROAD
 City TORRANCE State CA Zip Code 90505-7152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388101
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4990 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOLKERT , DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25621 AMBER LEAF ROAD
 City TORRANCE State CA Zip Code 90505-7152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388103
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VOLKERT , DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25621 AMBER LEAF ROAD
 City TORRANCE State CA Zip Code 90505-7152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419015
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. VOLKERT , DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25621 AMBER LEAF ROAD
 City TORRANCE State CA Zip Code 90505-7152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419145
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4991 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VON DREELE, WAYNE, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 315 E NEW ENGLAND AVENUE
UNIT 27

City WINTER PARK State FL Zip Code 32789-4477

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409574

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. VON GREMP, ANN, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 525 EMERALD BAY

City LAGUNA BEACH State CA Zip Code 92651-1256

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364415

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. VON STEEN, DALE, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 S ARBOR LN
343

City MERIDIAN State ID Zip Code 83642-3025

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349147

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4992 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VON STEEN, DALE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 S ARBOR LN 343
 City MERIDIAN State ID Zip Code 83642-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357989
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VON STEEN, DALE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 S ARBOR LN 343
 City MERIDIAN State ID Zip Code 83642-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357994
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VON STEEN, DALE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 S ARBOR LN 343
 City MERIDIAN State ID Zip Code 83642-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357995
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4993 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VON STEEN, DALE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 S ARBOR LN
 343
 City MERIDIAN State ID Zip Code 83642-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366878
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. VON STEEN, DALE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 S ARBOR LN
 343
 City MERIDIAN State ID Zip Code 83642-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399253
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

C. VON STEEN, DALE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 S ARBOR LN
 343
 City MERIDIAN State ID Zip Code 83642-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411954
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4994 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VON STEEN, DALE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 S ARBOR LN
 343
 City MERIDIAN State ID Zip Code 83642-3025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412044
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VORLICKY, LOREN, N., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16205 36 AVE N
 City PLYMOUTH State MN Zip Code 55446-3374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354646
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VORLICKY, LOREN, N., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16205 36 AVE N
 City PLYMOUTH State MN Zip Code 55446-3374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362481
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4995 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOUDREN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BROADWAY AVE.
 City MYSTIC State CT Zip Code 06355-2752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.353657
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. VOUDREN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BROADWAY AVE.
 City MYSTIC State CT Zip Code 06355-2752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358216
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VOUDREN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BROADWAY AVE.
 City MYSTIC State CT Zip Code 06355-2752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359814
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 4996 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VOUDREN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BROADWAY AVE.
 City MYSTIC State CT Zip Code 06355-2752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368905
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. VOUDREN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BROADWAY AVE.
 City MYSTIC State CT Zip Code 06355-2752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382329
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VRIENS, HEIDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3014 SHAKESPEARE PLACE
 City SALT LAKE CITY State UT Zip Code 84108-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402291
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4997 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. W, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE.
 X
 City T State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348395
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. W. JOHNSON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7881 COCOBAY DR
 City NAPLES State FL Zip Code 34108-6510
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378714
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352134
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4998 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358363
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382325
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WACKER, DELBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 BRITTANY RD
 City NORTHBROOK State IL Zip Code 60062-2103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401314
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4999 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WACKER, DELBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3807 BRITTANY RD

City NORTHBROOK	State IL	Zip Code 60062-2103
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2016

Transaction ID : SA11A.408180

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WACKER, DELBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3807 BRITTANY RD

City NORTHBROOK	State IL	Zip Code 60062-2103
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.416150

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WACKER, DELBERT, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3807 BRITTANY RD

City NORTHBROOK	State IL	Zip Code 60062-2103
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418309

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5000 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WADE, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5749 KENSINGTON RIDGE DRIVE

City CINCINNATI	State OH	Zip Code 45230-6500
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.364503

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WADE, TYLER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 255 KELLER CIR.

City FOLSOM	State CA	Zip Code 95630-7628
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) EMPLOYEE DEVELOPMENT CONSU
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 25 / 2016
Transaction ID : SA11A.408261

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WADIA, DINYAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 134 MAIN STREET

City NEW CANAAN	State CT	Zip Code 06840-5512
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CEO WADIA ASSOCIATES & CONSTRUCTION LL	Occupation (for Individual) ARCHITECT / BUILDER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
07 / 19 / 2016
Transaction ID : SA11A.349343

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5001 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WADIA, DINYAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 MAIN STREET
 City NEW CANAAN State CT Zip Code 06840-5512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEO WADIA ASSOCIATES & CONSTRUCTION LL Occupation (for Individual) ARCHITECT / BUILDER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383906
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WADIA, DINYAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 MAIN STREET
 City NEW CANAAN State CT Zip Code 06840-5512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CEO WADIA ASSOCIATES & CONSTRUCTION LL Occupation (for Individual) ARCHITECT / BUILDER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419511
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WAECHTER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2332 OAK RIDGE DRIVE
 City TROY State MI Zip Code 48098-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390956
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5002 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAECHTER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2332 OAK RIDGE DRIVE
City TROY State MI Zip Code 48098-5321
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397092
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WAECHTER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2332 OAK RIDGE DRIVE
City TROY State MI Zip Code 48098-5321
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409961
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WAFFENSMITH, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4444 MERRIBEE DRIVE
City GOLDEN VALLEY State MN Zip Code 55422-3669
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) OMNITOOL, INC. Occupation (for Individual) PRESIDENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369050
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5003 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WAFFENSMITH, WALTER, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2016
Mailing Address 4444 MERRIBEE DRIVE		Transaction ID : SA11A.412483
City GOLDEN VALLEY	State MN	Zip Code 55422-3669
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) OMNITOOL, INC.	Occupation (for Individual) PRESIDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WAFFENSMITH, WALTER, , ,		Date of Receipt MM / DD / YYYY 09 / 28 / 2016
Mailing Address 4444 MERRIBEE DRIVE		Transaction ID : SA11A.412488
City GOLDEN VALLEY	State MN	Zip Code 55422-3669
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) OMNITOOL, INC.	Occupation (for Individual) PRESIDENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WAGNER, CAMILLE, P., ,		Date of Receipt MM / DD / YYYY 08 / 01 / 2016
Mailing Address 6004 GLEN HILL ROAD		Transaction ID : SA11A.358802
City LOUISVILLE	State KY	Zip Code 40222-6128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5004 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAGNER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16425 CROSSHAVEN DR
 City CHARLOTTE State NC Zip Code 28278-8614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RBC Occupation (for Individual) TAX CREDIT SYNDICATION
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.400478
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. WAGNER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 PLUM STREET
 City ERIE State PA Zip Code 16507-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S. A. WAGNER AGENCY, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385983
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WAHL, HOUGHTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 769 BAYLISS DR
 City MARIETTA State GA Zip Code 30068-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394088
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5005 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAHL, HOUGHTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 769 BAYLISS DR
 City MARIETTA State GA Zip Code 30068-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414076
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. WAHL DICK, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10643 CAVALLO RIDGE
 City EDEN PRAIRIE State MN Zip Code 55347-2200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411898
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WAHLQUIST, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 DOWNS LAKE CIRCLE
 City DALLAS State TX Zip Code 75230-1900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365246
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5006 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAIBEL, SHELBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 823 S. BAER AVE.
 City PEORIA State IL Zip Code 61604-5905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITY POINT HEALTH METHODIST Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359745
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WAKEFIELD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4031 KENNETT PIKE APT 15
 City WILMINGTON State DE Zip Code 19807-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.370932
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350720
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5007 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374908
 Amount of Each Receipt this Period 5.00
 Memo Item CONTRIBUTION

B. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374909
 Amount of Each Receipt this Period 18.00
 Memo Item CONTRIBUTION

C. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374912
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	73.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5008 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.385058
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.390761
 Amount of Each Receipt this Period
 35.00
 Memo Item CONTRIBUTION

C. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400042
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5009 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408328
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

B. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412185
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WAKEHAM, SELMA, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17952 ATHENS AVE
 City VILLA PARK State CA Zip Code 92861-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412195
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5010 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAKEHAM, SELMA, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17952 ATHENS AVE

City VILLA PARK	State CA	Zip Code 92861-4501
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417975

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WALDROP, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 3298

City LAGRANDE	State OR	Zip Code 97850-7298
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A&B ENTERPRISES, INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391966

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WALDROP, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 3298

City LAGRANDE	State OR	Zip Code 97850-7298
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A&B ENTERPRISES, INC	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391967

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5011 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRAISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397878
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRAISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397887
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRAISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403105
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5012 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRAISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407393
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRAISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410577
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRAISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412237
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5013 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412277
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. WALDROP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3298
 City LAGRANDE State OR Zip Code 97850-7298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&B ENTERPRISES, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415520
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. WALDRIP, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 PINE STREET
 City NEW YORK State NY Zip Code 10005-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAHILL GORDON & REINDEL LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378991
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5014 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALDROP, MARGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 E. FIRST ST
 City LANCASTER State TX Zip Code 75146-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.355370
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALDROP, MARGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 E. FIRST ST
 City LANCASTER State TX Zip Code 75146-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.379027
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALDROP, MARGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 E. FIRST ST
 City LANCASTER State TX Zip Code 75146-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11A.399073
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5015 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 W SLAUGHTER LANE
 STE B
 City AUSTIN State TX Zip Code 78748-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTH STRATEGIES INC Occupation (for Individual) CFP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369928
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WALKER, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 W SLAUGHTER LANE
 STE B
 City AUSTIN State TX Zip Code 78748-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTH STRATEGIES INC Occupation (for Individual) CFP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403905
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WALKER, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 W SLAUGHTER LANE
 STE B
 City AUSTIN State TX Zip Code 78748-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTH STRATEGIES INC Occupation (for Individual) CFP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403944
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5016 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 W SLAUGHTER LANE
 STE B
 City AUSTIN State TX Zip Code 78748-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEALTH STRATEGIES INC Occupation (for Individual) CFP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403960
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALKER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 LAKE STREET
 City SAN FRANCISCO State CA Zip Code 94121-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345198
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WALKER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 LAKE STREET
 City SAN FRANCISCO State CA Zip Code 94121-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414452
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5017 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 BEACON STREET
 City BRIDGEPORT State CT Zip Code 06605-3404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRICEWATERHOUSECOOPERS Occupation (for Individual) SR. STRATEGIC CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411992
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WALKER, FRANCES, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5920 N CAMINO PADRE ISIDORO
 City TUCSON State AZ Zip Code 85718-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349683
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

C. WALKER, FRANCES, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5920 N CAMINO PADRE ISIDORO
 City TUCSON State AZ Zip Code 85718-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350901
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	295.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5018 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, FRANCES, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5920 N CAMINO PADRE ISIDORO
 City TUCSON State AZ Zip Code 85718-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374754
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

B. WALKER, FRANCES, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5920 N CAMINO PADRE ISIDORO
 City TUCSON State AZ Zip Code 85718-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388724
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALKER, FRANCES, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5920 N CAMINO PADRE ISIDORO
 City TUCSON State AZ Zip Code 85718-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 548.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399554
 Amount of Each Receipt this Period 20.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5019 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, FRANCES, ANN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON	State AZ	Zip Code 85718-4032
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
548.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417938

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. WALKER, FRANCES, ANN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON	State AZ	Zip Code 85718-4032
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
548.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.419947

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WALKER, HARVEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 612 LARK ROAD

City HOPE	State KS	Zip Code 67451-9103
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : SA11A.358745

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5020 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30856 HAYDEN LOOP ROAD

City CATALDO	State ID	Zip Code 83810-9203
-----------------	----------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.379532

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. WALKER, JON, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7171 N. HILLSIDE DR

City PARADISE VALLEY	State AZ	Zip Code 85253-2865
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNION LIFE & CASUALTY INSURANCE AGENCY	Occupation (for Individual) UNION LIFE & CASUALTY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352434

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WALKER, JON, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7171 N. HILLSIDE DR

City PARADISE VALLEY	State AZ	Zip Code 85253-2865
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNION LIFE & CASUALTY INSURANCE AGENCY	Occupation (for Individual) UNION LIFE & CASUALTY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375944

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5021 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, JON, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7171 N. HILLSIDE DR

City PARADISE VALLEY	State AZ	Zip Code 85253-2865
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNION LIFE & CASUALTY INSURANCE AGENCY	Occupation (for Individual) UNION LIFE & CASUALTY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.390506

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WALKER, JON, C., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7171 N. HILLSIDE DR

City PARADISE VALLEY	State AZ	Zip Code 85253-2865
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNION LIFE & CASUALTY INSURANCE AGENCY	Occupation (for Individual) UNION LIFE & CASUALTY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.401419

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WALKER, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 UNIVERSITY STREET
1503

City SEATTLE	State WA	Zip Code 98101-2797
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11A.359612

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5022 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 UNIVERSITY STREET
1503

City SEATTLE State WA Zip Code 98101-2797

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.405938

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. WALKER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 BLUFF DR.

City PISMO BEACH State CA Zip Code 93449-1543

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348487

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. WALKER, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6014 LONGWOOD DR

City ERIE State PA Zip Code 16505-1019

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LTL/NEMF Occupation (for Individual) PRES/DIRECTOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364866

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5023 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LONGWOOD DR
 City ERIE State PA Zip Code 16505-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LTL/NEMF Occupation (for Individual) PRES/DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372427
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WALKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 BLUFF DR.
 City PISMO BEACH State CA Zip Code 93449-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372697
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WALKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 LONGWOOD DR
 City ERIE State PA Zip Code 16505-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LTL/NEMF Occupation (for Individual) PRES/DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390213
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5024 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, ROBERT, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 WILLOW GRIN
 City LITITZ State PA Zip Code 17543-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEXLER WALKER Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.402088
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WALKER, TODD, A., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 BANBURY CT
 City MCLEAN State VA Zip Code 22102-1301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALTRIA CLIENT SERVICES Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5766.16

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.346481
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. WALKINGSTICK, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 278
 City CHANDLER State OK Zip Code 74834-0278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.397019
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5025 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALL, KATHALEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 27500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421188
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. WALL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 14001
 City KETCHUM State ID Zip Code 83340-4991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.373524
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. WALL, TERENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 620037
 City MIDDLETON State WI Zip Code 53562-0037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T WALL PROPERTIES MGMT. CORP. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385232
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5026 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1142 HUDSIN ROAD
 City CAMBRIDGE State MD Zip Code 21613-3234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386612
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WALLACE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3550 SW BOND AVENUE UNIT 1403
 City PORTLAND State OR Zip Code 97239-4720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.389453
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. WALLACE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 AURVIEW
 City SUNRISE BEACH State TX Zip Code 78643-9303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2016
Transaction ID : SA11A.354676
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5027 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 AURVIEW
 City SUNRISE BEACH State TX Zip Code 78643-9303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.377424
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WALLACE, ROMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 VINCENT PL
 City ELGIN State IL Zip Code 60123-5352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344523
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

C. WALLACE, ROMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 VINCENT PL
 City ELGIN State IL Zip Code 60123-5352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344524
 Amount of Each Receipt this Period
 27.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 154.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5028 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, ROMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 VINCENT PL
 City ELGIN State IL Zip Code 60123-5352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2016
Transaction ID : SA11A.388025
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WALLACE, ROMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 VINCENT PL
 City ELGIN State IL Zip Code 60123-5352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396712
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WALLACE, SHIRLEY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 WALNUT AVE
 City PEN ARGYL State PA Zip Code 18072-1276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350081
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5029 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLACE, SHIRLEY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 WALNUT AVE
 City PEN ARGYL State PA Zip Code 18072-1276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390247
 Amount of Each Receipt this Period 45.00
 Memo Item CONTRIBUTION

B. WALLACE, SHIRLEY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 WALNUT AVE
 City PEN ARGYL State PA Zip Code 18072-1276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390249
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALLISON, FRIEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2540 MASSACHUSETTS AVENUE, NW
 City WASHINGTON State DC Zip Code 20008-2843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362388
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 395.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5030 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLISON, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2540 MASSACHUSETTS AVE, NW
 City WASHINGTON State DC Zip Code 20008-2843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN ENTERPRISE INSTITUTE Occupation (for Individual) SENIOR FELLOW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408380
 Amount of Each Receipt this Period 4000.00
 Memo Item CONTRIBUTION

B. WALLS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 MCKENNA BLVD 2
 City MADISON State WI Zip Code 53719-2281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350541
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALLS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 MCKENNA BLVD 2
 City MADISON State WI Zip Code 53719-2281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374201
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5031 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALLS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 MCKENNA BLVD
 2
 City MADISON State WI Zip Code 53719-2281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2016
Transaction ID : SA11A.376108
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WALROD, TRUMAN, S., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 WEST DIMOND BLVD. SPC 1301
 SPACE 1301
 City ANCHORAGE State AK Zip Code 99515-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016
Transaction ID : SA11A.348237
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WALROD, TRUMAN, S., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 WEST DIMOND BLVD. SPC 1301
 SPACE 1301
 City ANCHORAGE State AK Zip Code 99515-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355771
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5032 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALROD, TRUMAN, S., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 WEST DIMOND BLVD. SPC 1301
 SPACE 1301
 City ANCHORAGE State AK Zip Code 99515-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380723
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WALROD, TRUMAN, S., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 WEST DIMOND BLVD. SPC 1301
 SPACE 1301
 City ANCHORAGE State AK Zip Code 99515-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407967
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WALSETH, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 FIRSTVIEW DRIVE
 City AUSTIN State TX Zip Code 78731-3809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.378809
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5033 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALSETH, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 FIRSTVIEW DRIVE
 City AUSTIN State TX Zip Code 78731-3809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 08 / 30 / 2016
Transaction ID : SA11A.384316
 Amount of Each Receipt this Period: 50.00
 Memo Item CONTRIBUTION

B. WALSETH, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4003 FIRSTVIEW DRIVE
 City AUSTIN State TX Zip Code 78731-3809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 29 / 2016
Transaction ID : SA11A.419983
 Amount of Each Receipt this Period: 100.00
 Memo Item CONTRIBUTION

C. WALSH, BETTE, L., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 GARDEN LANE
 City ATLANTIC BEACH State FL Zip Code 32233-4522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 26 / 2016
Transaction ID : SA11A.406819
 Amount of Each Receipt this Period: 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5034 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALSH, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 11450

City JACKSON	State WY	Zip Code 83002-1450
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016
Transaction ID : SA11A.371557

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

B. WALSH, MARYANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 326 SAND HILL ROAD

City PETERBOROUGH	State NH	Zip Code 03458-1617
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2016
Transaction ID : SA11A.397129

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3950 HWY 71E APT 711 APT. 711

City BASTROP	State TX	Zip Code 78602-4642
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3044.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016
Transaction ID : SA11A.348706

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5035 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.351022
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352415
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357289
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5036 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357290
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359117
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.361989
 Amount of Each Receipt this Period
 97.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 147.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5037 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.364173
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364876
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365139
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5038 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365146
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt **08 / 15 / 2016**
Transaction ID : SA11A.366343
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369962
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5039 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.380885
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.380888
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381845
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5040 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381848
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382592
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382593
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5041 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383189
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383190
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387452
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5042 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387465
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387468
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390385
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5043 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3950 HWY 71E APT 711
 APT. 711

City BASTROP	State TX	Zip Code 78602-4642
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3044.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.390964

Amount of Each Receipt this Period
 50.00

Memo Item
 CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3950 HWY 71E APT 711
 APT. 711

City BASTROP	State TX	Zip Code 78602-4642
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3044.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.390965

Amount of Each Receipt this Period
 50.00

Memo Item
 CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3950 HWY 71E APT 711
 APT. 711

City BASTROP	State TX	Zip Code 78602-4642
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 3044.00

Date of Receipt
 09 / 08 / 2016
Transaction ID : SA11A.391849

Amount of Each Receipt this Period
 30.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5044 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399458
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400113
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400115
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5045 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400116
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403306
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403309
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5046 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WALTERS, CHARLEEN, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 3950 HWY 71E APT 711 APT. 711		Transaction ID : SA11A.403335
City BASTROP	State TX	
Zip Code 78602-4642		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3044.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WALTERS, CHARLEEN, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 3950 HWY 71E APT 711 APT. 711		Transaction ID : SA11A.403339
City BASTROP	State TX	
Zip Code 78602-4642		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3044.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WALTERS, CHARLEEN, , ,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016
Mailing Address 3950 HWY 71E APT 711 APT. 711		Transaction ID : SA11A.407593
City BASTROP	State TX	
Zip Code 78602-4642		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 3044.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 5047 OF 5722	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
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<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412910
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414054
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414056
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5049 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415683
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415685
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.418610
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422015
 Amount of Each Receipt this Period 275.00
 Memo Item CONTRIBUTION

B. WALTERS, CHARLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 HWY 71E APT 711
 APT. 711
 City BASTROP State TX Zip Code 78602-4642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3044.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422120
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. WALTER, DAVID, A., , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 ROLLING OAKS ROAD
 City SANTA ROSA State CA Zip Code 95404-1413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392611
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 925.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 5051 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 261 OLD OVERTON DR
 City MADISON State AL Zip Code 35756-3496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.347604
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WALTER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 261 OLD OVERTON DR
 City MADISON State AL Zip Code 35756-3496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.380125
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALTER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 261 OLD OVERTON DR
 City MADISON State AL Zip Code 35756-3496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391875
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5052 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTER, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 261 OLD OVERTON DR
City MADISON State AL Zip Code 35756-3496
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409146
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WALTER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 PLEASANTVILLE RD POB38
City NEW VERNON State NJ Zip Code 07976-9707
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 03 / 2016
Transaction ID : SA11A.344232
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALTER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 PLEASANTVILLE RD POB38
City NEW VERNON State NJ Zip Code 07976-9707
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362047
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 PLEASANTVILLE RD POB38
 City NEW VERNON State NJ Zip Code 07976-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 03 / 2016
Transaction ID : SA11A.389241
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WALTER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 PLEASANTVILLE RD POB38
 City NEW VERNON State NJ Zip Code 07976-9707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403863
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WALTER, W. HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 FINK AVE
 City WILLIAMSPORT State PA Zip Code 17701-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 572.00

Date of Receipt 07 / 12 / 2016
Transaction ID : SA11A.346935
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5054 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTER, W. HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 FINK AVE
 City WILLIAMSPORT State PA Zip Code 17701-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 572.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358914
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WALTER, W. HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 FINK AVE
 City WILLIAMSPORT State PA Zip Code 17701-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 572.00

Date of Receipt 08 / 12 / 2016
Transaction ID : SA11A.365753
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WALTER, W. HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 FINK AVE
 City WILLIAMSPORT State PA Zip Code 17701-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 572.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374846
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5055 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTER, W. HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 FINK AVE
 City WILLIAMSPORT State PA Zip Code 17701-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 572.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393638
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WALTER, W. HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 FINK AVE
 City WILLIAMSPORT State PA Zip Code 17701-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 572.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399700
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WALTERS, WILLIAM, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4612 AMHERST ROAD
 City COLLEGE PARK State MD Zip Code 20740-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIV OF MARYLAND Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392815
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1075.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5056 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTHER, BONNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 RUNNYMEDE ROAD
 City DAYTON State OH Zip Code 45419-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALTHER ENGINERRING AND MGT Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378145
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WALTHER, BONNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 RUNNYMEDE ROAD
 City DAYTON State OH Zip Code 45419-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALTHER ENGINERRING AND MGT Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378424
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WALTON, CHRISTY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1860
 City BENTONVILLE State AR Zip Code 72712-1860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.393899
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5057 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WALTON-LUGLAN, DOROTHY, , ,

Mailing Address 601 LINCOLN CT.

City PROSSER State WA Zip Code 99350-1231

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2016

Transaction ID : SA11A.354717

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WALTON, NORMAN, , ,

Mailing Address 1511 38TH AVENUE E

City SEATTLE State WA Zip Code 98112-3845

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11A.358594

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WALTON, PETER, , ,

Mailing Address 19402 N PONDEROSA CT

City SURPRISE State AZ Zip Code 85387-4220

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
620.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11A.403392

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5058 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALTON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 SHERIDAN DR.
 City BIRMINGHAM State AL Zip Code 35213-3121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.363928
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WALZ, ROB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 WINNEBAGO AVE
 City PORTAGE State WI Zip Code 53901-1232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASCASE MOUNTAIN Occupation (for Individual) SKI AREA OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.362835
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. WAMSTED, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3016 WALTON WAY EXT
 City AUGUSTA State GA Zip Code 30909-3442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 08 / 2016
Transaction ID : SA11A.346016
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5059 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAMSTED, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3016 WALTON WAY EXT
 City AUGUSTA State GA Zip Code 30909-3442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 26 / 2016**
Transaction ID : SA11A.356440
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WAMSTED, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3016 WALTON WAY EXT
 City AUGUSTA State GA Zip Code 30909-3442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.389588
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WANEK, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5263
 City ETNA State WY Zip Code 83118-0263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.347426
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5060 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANEK, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5263
 City ETNA State WY Zip Code 83118-0263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.356209
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WANEK, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5263
 City ETNA State WY Zip Code 83118-0263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.383026
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WANEK, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5263
 City ETNA State WY Zip Code 83118-0263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385758
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5061 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANEK, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5263
 City ETNA State WY Zip Code 83118-0263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411285
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2016
Transaction ID : SA11A.346552
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346629
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5062 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346630
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.360245
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370630
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5063 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.383219
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385708
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WANTY, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 WOODLAND DRIVE
 304 WOODLAND DRIVE
 City CHELSEA State MI Zip Code 48118-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.387162
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5064 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WANTY, MARILYN, , ,		Date of Receipt MM / DD / YYYY 09 / 17 / 2016 Transaction ID : SA11A.400228
Mailing Address 304 WOODLAND DRIVE 304 WOODLAND DRIVE		Amount of Each Receipt this Period 50.00
City CHELSEA	State MI	Zip Code 48118-2115
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WANTY, MARILYN, , ,		Date of Receipt MM / DD / YYYY 09 / 24 / 2016 Transaction ID : SA11A.408850
Mailing Address 304 WOODLAND DRIVE 304 WOODLAND DRIVE		Amount of Each Receipt this Period 100.00
City CHELSEA	State MI	Zip Code 48118-2115
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WANTY, MARILYN, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2016 Transaction ID : SA11A.419473
Mailing Address 304 WOODLAND DRIVE 304 WOODLAND DRIVE		Amount of Each Receipt this Period 50.00
City CHELSEA	State MI	Zip Code 48118-2115
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 775.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5065 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WANZONG, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 N. FORD AVE
 301
 City FULLERTON State CA Zip Code 92832-1453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347593
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WANZONG, ROBERT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 N. FORD AVE
 301
 City FULLERTON State CA Zip Code 92832-1453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357261
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WAPPLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7994 PEACHTMONT AVE NW
 City NORTH CANTON State OH Zip Code 44720-5776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SURGERE, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386404
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5066 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAPPLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7994 PEACHMONT AVE NW
 City NORTH CANTON State OH Zip Code 44720-5776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SURGERE, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390552
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WAPPLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7994 PEACHMONT AVE NW
 City NORTH CANTON State OH Zip Code 44720-5776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SURGERE, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403992
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WAPPLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7994 PEACHMONT AVE NW
 City NORTH CANTON State OH Zip Code 44720-5776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SURGERE, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.404018
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5067 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, CAROL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14300 JACKSON RD

City RANCHO MURIETA	State CA	Zip Code 95683-9712
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414133

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. WARD, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TARA DRIVE

City BURLESON	State TX	Zip Code 76028-8237
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402333

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WARD, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TARA DRIVE

City BURLESON	State TX	Zip Code 76028-8237
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402335

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5068 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TARA DRIVE

City BURLESON	State TX	Zip Code 76028-8237
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415843

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WARD, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TARA DRIVE

City BURLESON	State TX	Zip Code 76028-8237
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415846

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WARD, CHUCK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 920 TARA DRIVE

City BURLESON	State TX	Zip Code 76028-8237
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415848

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5069 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 T. STREET, #5
5

City SALT LAKE CITY State UT Zip Code 84103-4158

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JENNIFER WARD Occupation (for Individual) COGNIZANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
09 / 09 / 2016
Transaction ID : SA11A.392103

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WARD, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 T. STREET, #5
5

City SALT LAKE CITY State UT Zip Code 84103-4158

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JENNIFER WARD Occupation (for Individual) COGNIZANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.418320

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WARD, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3510 VERANDA BLVD

City PARRISH State FL Zip Code 34219-9466

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
253.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.388252

Amount of Each Receipt this Period
203.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 278.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5070 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3510 VERANDA BLVD
 City PARRISH State FL Zip Code 34219-9466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt **09 / 28 / 2016**
Transaction ID : SA11A.412069
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.352768
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374425
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5071 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2016
Transaction ID : SA11A.393784
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2016
Transaction ID : SA11A.393785
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408580
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5072 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 29TH AVE NE
 City MINNEAPOLIS State MN Zip Code 55418-3241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419100
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. WARD, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 78
 City PENRYN State CA Zip Code 95663-0078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401098
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 CONTRIBUTION

C. WARD, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 STEARNLEE AVE
 City LONG BEACH State CA Zip Code 90815-1935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355734
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5073 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 STEARNLEE AVE
 City LONG BEACH State CA Zip Code 90815-1935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380713
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WARD, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 STEARNLEE AVE
 City LONG BEACH State CA Zip Code 90815-1935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.408016
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WARDER, JAMES, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 LAKE VIEW DR
 City BOERNE State TX Zip Code 78006-5616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.358863
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2800.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5074 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARDEN, JEAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 STATE ROAD OO
 City HOLTS SUMMIT State MO Zip Code 65043-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.348815
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WARDEN, JEAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 STATE ROAD OO
 City HOLTS SUMMIT State MO Zip Code 65043-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.363089
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WARDEN, JEAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 STATE ROAD OO
 City HOLTS SUMMIT State MO Zip Code 65043-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 25 / 2016**
Transaction ID : SA11A.380901
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5075 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARDEN, JEAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 STATE ROAD OO
 City HOLTS SUMMIT State MO Zip Code 65043-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406005
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WARDEN, JEAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 STATE ROAD OO
 City HOLTS SUMMIT State MO Zip Code 65043-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406079
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WARDEN, JEAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 STATE ROAD OO
 City HOLTS SUMMIT State MO Zip Code 65043-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413706
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5076 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARDEN, JEAN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 STATE ROAD OO
 City HOLTS SUMMIT State MO Zip Code 65043-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.413718
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WARDEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HILLCREST DR
 City HENRYETTA State OK Zip Code 74437-1908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.365022
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WARDEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HILLCREST DR
 City HENRYETTA State OK Zip Code 74437-1908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372845
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5077 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARDEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HILLCREST DR
 City HENRYETTA State OK Zip Code 74437-1908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372847
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WARDEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HILLCREST DR
 City HENRYETTA State OK Zip Code 74437-1908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372849
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WARDEN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 HILLCREST DR
 City HENRYETTA State OK Zip Code 74437-1908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.385099
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5078 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARDEN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1701 HILLCREST DR

City HENRYETTA	State OK	Zip Code 74437-1908
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2016

Transaction ID : SA11A.398218

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WARDEN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1701 HILLCREST DR

City HENRYETTA	State OK	Zip Code 74437-1908
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2016

Transaction ID : SA11A.420136

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WARE, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6201 PARTRIDGE COURT

City BRENTWOOD	State TN	Zip Code 37027-5600
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2016

Transaction ID : SA11A.414526

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5079 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARFEL, DERRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11150 CANBY AVENUE
 City PORTER RANCH State CA Zip Code 91326-2503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406497
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WARLICK, LOUIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 WHITE OAK DR APT 314 APT 314
 City EXETER State NH Zip Code 03833-5315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386160
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WARLICK, LOUIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 WHITE OAK DR APT 314 APT 314
 City EXETER State NH Zip Code 03833-5315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386173
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5080 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARLICK, LOUIS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 WHITE OAK DR APT 314
 APT 314
 City EXETER State NH Zip Code 03833-5315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397817
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WARMAN, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 COVE II PLACE
 921
 City SARASOTA State FL Zip Code 34242-2426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL STAT HOME HEALTH Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.409419
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. WARNER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 GRANDVIEW AVENUE
 City LOOKOUT MOUNTAIN State TN Zip Code 37350-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PORTER WARNER IND Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.391620
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5081 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARREN, NITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 E COOPER STREET
 City BROWNSVILLE State TN Zip Code 38012-3524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.357917
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WARREN, NITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 E COOPER STREET
 City BROWNSVILLE State TN Zip Code 38012-3524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.371377
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WARREN, NITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 E COOPER STREET
 City BROWNSVILLE State TN Zip Code 38012-3524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394806
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5082 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARREN, NITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 E COOPER STREET
 City BROWNSVILLE State TN Zip Code 38012-3524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417068
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WARREN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2062 COURTLAND AVE.
 City SAN MARINO State CA Zip Code 91108-1753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 21 / 2016
Transaction ID : SA11A.377468
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WARREN, XIAOJUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12146 QUAIL CREEK DR.
 City HOUSTON State TX Zip Code 77070-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISD Occupation (for Individual) TEACHER/SUB TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.388015
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1225.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5083 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARREN, XIAOJUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12146 QUAIL CREEK DR.
 City HOUSTON State TX Zip Code 77070-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISD Occupation (for Individual) TEACHER/SUB TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 01 / 2016
Transaction ID : SA11A.388019
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WARREN, XIAOJUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12146 QUAIL CREEK DR.
 City HOUSTON State TX Zip Code 77070-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MISD Occupation (for Individual) TEACHER/SUB TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419946
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WARRICK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3102 TIGERTAIL DRIVE
 City LOS ALAMITOS State CA Zip Code 90720-5239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392402
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1075.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5084 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WART, GARY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9507 SE EVERGREEN HWY
 City VANCOUVER State WA Zip Code 98664-2831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVAMERE GROUP, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381559
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. WASHBURN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 WHITE OAK DRIVE
 City BATESVILLE State IN Zip Code 47006-7693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDIANA UNIVERSITY SCHOOL OF MEDICINE Occupation (for Individual) MEDICAL STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355735
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WASHBURN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 WHITE OAK DRIVE
 City BATESVILLE State IN Zip Code 47006-7693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDIANA UNIVERSITY SCHOOL OF MEDICINE Occupation (for Individual) MEDICAL STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.380707
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5085 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WASHBURN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 WHITE OAK DRIVE
 City BATESVILLE State IN Zip Code 47006-7693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDIANA UNIVERSITY SCHOOL OF MEDICINE Occupation (for Individual) MEDICAL STUDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407990
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WASHBURN, STEVEN, D., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 RIDGE DR
 City PINETOP State AZ Zip Code 85935-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ORTHO SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.358928
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WASHBURN, STEVEN, D., DR., M.D.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 RIDGE DR
 City PINETOP State AZ Zip Code 85935-7260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ORTHO SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409158
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5086 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WASIELEWSKI, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7590 BRANDON ROAD
 City NEW ALBANY State OH Zip Code 43054-9059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409890
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WASMER, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385812
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WASMER, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405713
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5087 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WASMER, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405716
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WASMER, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422399
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WASMER, PEDRO, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358530
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5088 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WASMER, PEDRO, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD.
 City NAPLES State FL Zip Code 34102-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374180
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WATERS, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4267 GREENVIEW DR
 City EL DORADO HILLS State CA Zip Code 95762-7622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358009
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WATERS, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4267 GREENVIEW DR
 City EL DORADO HILLS State CA Zip Code 95762-7622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382144
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5089 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATKINS, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4025 SHORE LANE
 2536
 City BOCA GRANDE State FL Zip Code 33921-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394399
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WATKINS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 934 POP NOAH RD.
 City COLLINSVILLE State TX Zip Code 76233-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ANNOUNCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398131
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WATKINS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 934 POP NOAH RD.
 City COLLINSVILLE State TX Zip Code 76233-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ANNOUNCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398134
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5090 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATKINS, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 934 POP NOAH RD.
City COLLINSVILLE State TX Zip Code 76233-3328
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ANNOUNCER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423116
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WATKINS, WALTER, F., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1870 BRIDLE RIDGE TRACE
City ROSWELL State GA Zip Code 30075-2151
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SCHUMACHER CLINICAL PARTNERS Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357953
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WATKINS, WALTER, F., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1870 BRIDLE RIDGE TRACE
City ROSWELL State GA Zip Code 30075-2151
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SCHUMACHER CLINICAL PARTNERS Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386747
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5091 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 REGATTA DRIVE
 City AMELIA ISLAND State FL Zip Code 32034-5541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389270
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WATSON, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1718
 City DEMOREST State GA Zip Code 30535-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NANCY M WATSON MD PC Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384569
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WATSON, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1718
 City DEMOREST State GA Zip Code 30535-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NANCY M WATSON MD PC Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416020
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5092 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, DIANA, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 HIRSCHFIELD DR
 City BUFFALO State NY Zip Code 14221-6877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 01 / 2016**
Transaction ID : SA11A.358698
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WATSON, HUBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1157 SWEET HEATHER LANE
 City APOPKA State FL Zip Code 32712-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASSEMBLY FASTENRS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 231.00

Date of Receipt **09 / 29 / 2016**
Transaction ID : SA11A.416252
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WATSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2130 KERNS MILL RD
 City SUTHERLIN State VA Zip Code 24594-3645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359200
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **850.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5093 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, RAY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6153 SUNRISE MEADOWS LOOP
 City RENO State NV Zip Code 89519-7339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2016
Transaction ID : SA11A.391018
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WATSON, RAY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6153 SUNRISE MEADOWS LOOP
 City RENO State NV Zip Code 89519-7339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.397704
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WATSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 5TH AVENUE
 City NEW YORK State NY Zip Code 10128-0806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364778
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5094 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1140 5TH AVENUE
 City NEW YORK State NY Zip Code 10128-0806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390765
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WATTERSON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8810 EMERALD STREET
 City ANCHORAGE State AK Zip Code 99502-5129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATTERSON CONSTRUCTION CO Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411490
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WATTLES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 SESPE AVE
 FILLMORE
 City FILLMORE State CA Zip Code 93015-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD WATTLES Occupation (for Individual) PACIFIC PROFESSIONALS INC.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358025
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5095 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATTLES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 SESPE AVE
 FILLMORE
 City FILLMORE State CA Zip Code 93015-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD WATTLES Occupation (for Individual) PACIFIC PROFESSIONALS INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382428
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WATTLES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 SESPE AVE
 FILLMORE
 City FILLMORE State CA Zip Code 93015-1916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD WATTLES Occupation (for Individual) PACIFIC PROFESSIONALS INC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416123
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WATTMAN, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4031 KENNETT PIKE APT 58
 City WILMINGTON State DE Zip Code 19807-2033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358510
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5096 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAXMAN, ERIC, STEVEN, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11840 CHAPARAL STREET
 City LOS ANGELES State CA Zip Code 90049-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIES MANAGEMTN LLC Occupation (for Individual) FIN ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376432
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WAY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE BOWERMAN DR.
 City BEAVERTON State OR Zip Code 97005-0979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIKE Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358523
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. WAYTE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6730 N DOLORES AVENUE
 City FRESNO State CA Zip Code 93711-1358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376916
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5097 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEATHERSON, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 WOODLAND TRACE
 City NEW LONDON State NH Zip Code 03257-6079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386809
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WEAVER, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6003 FLAT WOOD LANE
 City ARLINGTON State TX Zip Code 76018-3143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER & ASSOCIATES, INC. Occupation (for Individual) PRESIDENT/BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353640
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEAVER, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2931 GOLFSIDE DRIVE
 City NAPLES State FL Zip Code 34110-7003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361158
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5098 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEAVER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 SKIFF LANE
PORT LUDLOW

City PORT LUDLOW State WA Zip Code 98365-9316

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2300.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348648

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WEAVER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 SKIFF LANE
PORT LUDLOW

City PORT LUDLOW State WA Zip Code 98365-9316

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2300.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348669

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WEAVER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 SKIFF LANE
PORT LUDLOW

City PORT LUDLOW State WA Zip Code 98365-9316

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2300.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348693

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5099 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEAVER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 SKIFF LANE
 PORT LUDLOW
 City PORT LUDLOW State WA Zip Code 98365-9316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.352750
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WEAVER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 SKIFF LANE
 PORT LUDLOW
 City PORT LUDLOW State WA Zip Code 98365-9316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.360176
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WEAVER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 SKIFF LANE
 PORT LUDLOW
 City PORT LUDLOW State WA Zip Code 98365-9316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366689
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5100 OF 5722
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 16 / 2016 Transaction ID : SA11A.368154
Mailing Address 82 SKIFF LANE PORT LUDLOW		Amount of Each Receipt this Period 100.00
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 28 / 2016 Transaction ID : SA11A.382628
Mailing Address 82 SKIFF LANE PORT LUDLOW		Amount of Each Receipt this Period 100.00
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 28 / 2016 Transaction ID : SA11A.382629
Mailing Address 82 SKIFF LANE PORT LUDLOW		Amount of Each Receipt this Period 100.00
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5101 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 08 / 30 / 2016
Mailing Address 82 SKIFF LANE PORT LUDLOW		Transaction ID : SA11A.384001
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 09 / 01 / 2016
Mailing Address 82 SKIFF LANE PORT LUDLOW		Transaction ID : SA11A.387863
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 09 / 14 / 2016
Mailing Address 82 SKIFF LANE PORT LUDLOW		Transaction ID : SA11A.396631
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5102 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 09 / 23 / 2016 Transaction ID : SA11A.404863
Mailing Address 82 SKIFF LANE PORT LUDLOW		Amount of Each Receipt this Period 25.00
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016 Transaction ID : SA11A.407580
Mailing Address 82 SKIFF LANE PORT LUDLOW		Amount of Each Receipt this Period 25.00
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WEAVER, JOHN, , ,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016 Transaction ID : SA11A.407586
Mailing Address 82 SKIFF LANE PORT LUDLOW		Amount of Each Receipt this Period 25.00
City PORT LUDLOW	State WA	Zip Code 98365-9316
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5103 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBB, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5001 BILTMORE FOREST DRIVE
 City MATTHEWS State NC Zip Code 28105-2854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376811
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355668
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.357735
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5104 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370716
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.373250
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374557
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5105 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380115
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390384
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408165
 Amount of Each Receipt this Period
 38.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5106 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414109
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WEBER, EDWARD, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1165
 City PORT EWEN State NY Zip Code 12466-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416569
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WEBER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10280 WOODCREEK DRIVE
 City CEDARBURG State WI Zip Code 53012-8850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OMEGA INDUSTRIAL PRODUCTS, INC. Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402714
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5107 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, LANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 KINGS GRANT RD.
 City VIRGINIA BEACH State VA Zip Code 23452-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350264
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WEBER, LANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 KINGS GRANT RD.
 City VIRGINIA BEACH State VA Zip Code 23452-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.359601
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEBER, LANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 KINGS GRANT RD.
 City VIRGINIA BEACH State VA Zip Code 23452-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372103
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5108 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, LANI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 KINGS GRANT RD.
City VIRGINIA BEACH State VA Zip Code 23452-7013
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 08 / 2016
Transaction ID : SA11A.391786
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WEBER, LANI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 KINGS GRANT RD.
City VIRGINIA BEACH State VA Zip Code 23452-7013
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 13 / 2016
Transaction ID : SA11A.396735
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEBER, LANI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 KINGS GRANT RD.
City VIRGINIA BEACH State VA Zip Code 23452-7013
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11A.401586
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 75.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5109 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBER, LANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 KINGS GRANT RD.
 City VIRGINIA BEACH State VA Zip Code 23452-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403999
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WEBER, LANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 KINGS GRANT RD.
 City VIRGINIA BEACH State VA Zip Code 23452-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411975
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WEBSTER, ARDELLE, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 BEECHWOOD TERRACE
 City WELLESLEY State MA Zip Code 02482-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.356663
 Amount of Each Receipt this Period
 20.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5110 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBSTER, ARDELLE, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 BEECHWOOD TERRACE

City WELLESLEY	State MA	Zip Code 02482-2301
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2016

Transaction ID : SA11A.364478

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

B. WEBSTER, ARDELLE, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 BEECHWOOD TERRACE

City WELLESLEY	State MA	Zip Code 02482-2301
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2016

Transaction ID : SA11A.409678

Amount of Each Receipt this Period
220.00

Memo Item CONTRIBUTION

C. WEBSTER, ARDELLE, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 BEECHWOOD TERRACE

City WELLESLEY	State MA	Zip Code 02482-2301
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2016

Transaction ID : SA11A.414643

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	265.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5111 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBSTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 EAGLE DRIVE
 City NOVATO State CA Zip Code 94949-5829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.347648
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WEBSTER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 86
 City ELM GROVE State WI Zip Code 53122-0086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370357
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEBSTER, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 18TH STREET S
 City ARLINGTON State VA Zip Code 22202-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **08 / 12 / 2016**
Transaction ID : SA11A.365337
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5112 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEBSTER, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 18TH STREET S
 City ARLINGTON State VA Zip Code 22202-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378480
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WEBSTER, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 18TH STREET S
 City ARLINGTON State VA Zip Code 22202-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397241
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WECKER, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 E SIMPSON AVE PO BOX 1010
 City JACKSON State WY Zip Code 83001-8482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM E. WECKER ASSOCIATES, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383565
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10750.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5113 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEED, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 PARKPLACE CENTER STE 500
 City KIRKLAND State WA Zip Code 98033-6296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAVE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.365629
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

B. WEESNER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 PINCKNEY STREET
 City BOSTON State MA Zip Code 02114-4800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376694
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEHRHEIM, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 CENTER OAK DR
 City PITTSBURGH State PA Zip Code 15237-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348939
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5114 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEHRHEIM, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 CENTER OAK DR
 City PITTSBURGH State PA Zip Code 15237-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359900
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. WEHRHEIM, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 CENTER OAK DR
 City PITTSBURGH State PA Zip Code 15237-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384783
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WEHRHEIM, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 CENTER OAK DR
 City PITTSBURGH State PA Zip Code 15237-6112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419596
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5115 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WEHRMEYER, SAMUEL, , ,

Mailing Address **PO BOX 13352**

City LA JOLLA	State CA	Zip Code 92039-3352
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMUEL WEHRMEYER	Occupation (for Individual) BUSINESS OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
524.00

Date of Receipt
07 / 30 / 2016

Transaction ID : SA11A.359852

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WEHRMEYER, SAMUEL, , ,

Mailing Address **PO BOX 13352**

City LA JOLLA	State CA	Zip Code 92039-3352
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMUEL WEHRMEYER	Occupation (for Individual) BUSINESS OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
524.00

Date of Receipt
08 / 30 / 2016

Transaction ID : SA11A.384773

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WEHRMEYER, SAMUEL, , ,

Mailing Address **PO BOX 13352**

City LA JOLLA	State CA	Zip Code 92039-3352
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMUEL WEHRMEYER	Occupation (for Individual) BUSINESS OWNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
524.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11A.419615

Amount of Each Receipt this Period
131.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	393.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5116 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEIHER, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 813 E CAPITOL STRET SE
 City WASHINGTON State DC Zip Code 20003-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 18 / 2016**
Transaction ID : SA11A.347751
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WEIHER, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 813 E CAPITOL STRET SE
 City WASHINGTON State DC Zip Code 20003-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.380998
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WEIHER, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 813 E CAPITOL STRET SE
 City WASHINGTON State DC Zip Code 20003-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 23 / 2016**
Transaction ID : SA11A.406515
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5117 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEINBERGER, LEON, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25013 N. VADO COURT
 City RIO VERDE State AZ Zip Code 85263-8103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412688
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WEINER, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 S QUEBEC WAY 104
 City DENVER State CO Zip Code 80231-5696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373002
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEINER, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 S QUEBEC WAY 104
 City DENVER State CO Zip Code 80231-5696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373004
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5118 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEINER, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 S QUEBEC WAY
 104
 City DENVER State CO Zip Code 80231-5696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373005
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WEINSELBAUM, ARLENE, M., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11606 NW 2ND AVENUE
 City GAINESVILLE State FL Zip Code 32607-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350849
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEINSTEIN, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HUDSON STREET UNIT 306
 City DENVER State CO Zip Code 80220-5874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.395856
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5119 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEIS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6061 SYDNEY DR
 City HUNTINGTON BEACH State CA Zip Code 92647-2429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L. J. ENGINEERING, INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347468
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WEIS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6061 SYDNEY DR
 City HUNTINGTON BEACH State CA Zip Code 92647-2429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L. J. ENGINEERING, INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353689
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WEIS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6061 SYDNEY DR
 City HUNTINGTON BEACH State CA Zip Code 92647-2429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L. J. ENGINEERING, INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375759
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5120 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISENBURGER, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 MARTINDALE WAY

City GLENDDORA	State CA	Zip Code 91741-2446
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2016

Transaction ID : SA11A.378488

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WEISHAR, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 TODDS POINT ROAD

City SIMPSONVILLE	State KY	Zip Code 40067-6545
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2016

Transaction ID : SA11A.396340

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. WEISS, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5779 OLD FOREST LANE

City WEST CHESTER	State OH	Zip Code 45069-5910
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
332.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.347832

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5121 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, NITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BARDINI DRIVE
 City MELVILLE State NY Zip Code 11747-5326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11A.358685
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WEISS, NITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BARDINI DRIVE
 City MELVILLE State NY Zip Code 11747-5326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373014
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WEISS, NITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 BARDINI DRIVE
 City MELVILLE State NY Zip Code 11747-5326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413998
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5122 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, ROBERT, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16523 ON PAR BOUELVARD
 City FORT MYERS State FL Zip Code 33908-2879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.351836
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WEIST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 N LAKE SHORE DRIVE APT 15D
 City CHICAGO State IL Zip Code 60611-6165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377769
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WELLEHAN, DANIEL, J., MR., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 CURTIS ROAD
 City YARMOUTH State ME Zip Code 04096-5945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396383
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5123 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLEMEYER, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 ROSEDALE ROAD
 City PRINCETON State NJ Zip Code 08540-6701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : SA11A.375174
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. WELLEMEYER, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 ROSEDALE ROAD
 City PRINCETON State NJ Zip Code 08540-6701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.406513
 Amount of Each Receipt this Period
 600.00
 Memo Item
 CONTRIBUTION

C. WELLE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6507 LAVINIA RD NE
 City BEMIDJI State MN Zip Code 56601-9009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372444
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5124 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4338 STANDFILL LANE
 City VACAVILLE State CA Zip Code 95688-9344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389337
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WELLS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4338 STANDFILL LANE
 City VACAVILLE State CA Zip Code 95688-9344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404430
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WELLS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4338 STANDFILL LANE
 City VACAVILLE State CA Zip Code 95688-9344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420156
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5125 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, GLORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5032 ORTEGA FOREST DRIVE

City JACKSONVILLE	State FL	Zip Code 32210-8114
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414162

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WELLS, GLORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5032 ORTEGA FOREST DRIVE

City JACKSONVILLE	State FL	Zip Code 32210-8114
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414177

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WELLS, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 535 HAGEN DRIVE

City HENDERSONVILLE	State NC	Zip Code 28739-8940
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402690

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5126 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, JAIME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 19TH ST #6C
 City DENVER State CO Zip Code 80202-6008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RTG MINING Occupation (for Individual) INVESTOR RELATIONS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385842
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. WELLS, JAIME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 19TH ST #6C
 City DENVER State CO Zip Code 80202-6008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RTG MINING Occupation (for Individual) INVESTOR RELATIONS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394294
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. WELLS, JAIME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 19TH ST #6C
 City DENVER State CO Zip Code 80202-6008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RTG MINING Occupation (for Individual) INVESTOR RELATIONS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394296
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5127 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358420
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.361026
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **09 / 01 / 2016**
Transaction ID : SA11A.387955
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5128 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398846
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405412
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413580
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5129 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELLS, LYLE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 W BOWLING ST
 City ANAHEIM State CA Zip Code 92804-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416375
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WELLS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5598 TWIN LAKES CT
 City WESTERVILLE State OH Zip Code 43082-7214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WELLS MARK Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362406
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WELLS, SCOTT, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 ROYALSTON RD
 City WELLESLEY State MA Zip Code 02481-1220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLEAR CHANNEL OUTDOOR Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419666
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5130 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELSH, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 COX ROAD

City NEWARK	State DE	Zip Code 19711-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.389815

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. WELTE, ROBERT, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 PORT ST., COTTAGE 324

City EASTON	State MD	Zip Code 21601-8155
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348428

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WELTE, ROBERT, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 PORT ST., COTTAGE 324

City EASTON	State MD	Zip Code 21601-8155
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372708

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5131 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WELTE, ROBERT, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 PORT ST., COTTAGE 324
 City EASTON State MD Zip Code 21601-8155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 18 / 2016**
Transaction ID : SA11A.399918
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WENDLING, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 W HAWTHORNE DRIVE
 City EFFINGHAM State IL Zip Code 62401-2820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.369511
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WENDLING, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 W HAWTHORNE DRIVE
 City EFFINGHAM State IL Zip Code 62401-2820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11A.407081
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5132 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WENDT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1559
 City SULTAN State WA Zip Code 98294-1559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SULTAN VETERINARY CLINIC Occupation (for Individual) VETERINARIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.392240
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WENDT, NANCY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 826 LOMA LINDA DRIVE
 City KLAMATH FALLS State OR Zip Code 97601-2360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371397
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WENK, LESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 OAK DR
 City BAY CITY State TX Zip Code 77414-7339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAY CITY ISD Occupation (for Individual) SUBSTITUTE TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416612
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WERMERS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 SUNDOWN DR
 City BERTHOUD State CO Zip Code 80513-9441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 14 / 2016**
Transaction ID : SA11A.347451
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WERMERS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 SUNDOWN DR
 City BERTHOUD State CO Zip Code 80513-9441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11A.370352
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WERMERS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 SUNDOWN DR
 City BERTHOUD State CO Zip Code 80513-9441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **09 / 13 / 2016**
Transaction ID : SA11A.394445
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5134 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WERNER, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22502 ALMADEN
 City MISSION VIEJO State CA Zip Code 92691-1403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AEROFIT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.355809
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WERNER, DAVID, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22502 ALMADEN
 City MISSION VIEJO State CA Zip Code 92691-1403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AEROFIT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364411
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WERTZ, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 MCINTYRE AVE
 City WINTER PARK State FL Zip Code 32789-5000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERAN'S AFFAIRS Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 22 / 2016**
Transaction ID : SA11A.354863
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5135 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WERNTZ, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 MCINTYRE AVE
 City WINTER PARK State FL Zip Code 32789-5000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERAN'S AFFAIRS Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 22 / 2016**
Transaction ID : SA11A.375702
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WERNTZ, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 MCINTYRE AVE
 City WINTER PARK State FL Zip Code 32789-5000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF VETERAN'S AFFAIRS Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.404216
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WESSELS, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LINDEN HILL DRIVE
 City CRESCENT SPRINGS State KY Zip Code 41017-1327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESSELS CONSTRUCTION Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : SA11A.351100
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5136 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEST, K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 631936
 City LITTLETON State CO Zip Code 80163-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.380964
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. WEST, KENNETH, JAMES, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 631936
 City LITTLETON State CO Zip Code 80163-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 08 / 12 / 2016
Transaction ID : SA11A.365238
 Amount of Each Receipt this Period
 300.00
 Memo Item CONTRIBUTION

C. WEST, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 S. EVANSTON AVE
 City TULSA State OK Zip Code 74104-6128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARATHON Occupation (for Individual) ELECTRICAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404850
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5137 OF 5722		
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEST, LANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 KINGLET CIRCLE
 City GREENSBORO State NC Zip Code 27455-1362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370694
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WEST, LANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 KINGLET CIRCLE
 City GREENSBORO State NC Zip Code 27455-1362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 10 / 2016
Transaction ID : SA11A.393791
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WEST, LANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 KINGLET CIRCLE
 City GREENSBORO State NC Zip Code 27455-1362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405356
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5138 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEST, LANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 KINGLET CIRCLE
 City GREENSBORO State NC Zip Code 27455-1362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413884
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WEST, NANCY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2315 BRIARWOOD DR.
 City SAN ANTONIO State TX Zip Code 78209-4259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTHOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360188
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WEST, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 WINDSONG
 City SANDY State UT Zip Code 84092-4912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVERVUE Occupation (for Individual) TECH MGMT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422811
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WESTERFIELD, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6933 SHADOW CREEK COURT
 City FORT WORTH State TX Zip Code 76132-4524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373572
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WESTHOFF, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2605 9TH ST SW
 City WILLMAR State MN Zip Code 56201-5040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373306
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WESTHOFF, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2605 9TH ST SW
 City WILLMAR State MN Zip Code 56201-5040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5140 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WESTHOFF, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2605 9TH ST SW
 City WILLMAR State MN Zip Code 56201-5040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382120
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WESTHOFF, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2605 9TH ST SW
 City WILLMAR State MN Zip Code 56201-5040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384369
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378717
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5141 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384000
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384007
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.391217
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5142 OF 5722
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391220
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391221
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410471
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5143 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410479
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WETMORE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 INVERRARY RD
 City PINEHURST State NC Zip Code 28374-6907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410482
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEXNER, ABIGAIL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE WHITEBORN RD
 City NEW ALBANY State OH Zip Code 43054-9407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383567
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5144 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEXNER, ABIGAIL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE WHITEBORN RD
 City NEW ALBANY State OH Zip Code 43054-9407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 7700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.385401
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. WEYERHAEUSER, WILLIAM, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1278
 City TACOMA State WA Zip Code 98401-1278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.356864
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

C. WEYFORTH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14391 S GARNETT ST
 City OLATHE State KS Zip Code 66062-8403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349772
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5145 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEYFORTH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14391 S GARNETT ST
 City OLATHE State KS Zip Code 66062-8403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2016
Transaction ID : SA11A.362606
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. WEYFORTH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14391 S GARNETT ST
 City OLATHE State KS Zip Code 66062-8403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.386519
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WEYFORTH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14391 S GARNETT ST
 City OLATHE State KS Zip Code 66062-8403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399325
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5146 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEYFORTH, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14391 S GARNETT ST
 City OLATHE State KS Zip Code 66062-8403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402635
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WEYLER, WALTER, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 SW 10TH AVENUE UNIT 805
 City PORTLAND State OR Zip Code 97205-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367923
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. WEYLER, WALTER, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 SW 10TH AVENUE UNIT 805
 City PORTLAND State OR Zip Code 97205-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389704
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 3100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5147 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHALEN, MALACHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 SMITHFIELD ST
 City PITTSBURGH State PA Zip Code 15222-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MALACHY WHALEN & CO. INC. Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 524.00

Date of Receipt **07 / 30 / 2016**
Transaction ID : SA11A.359863
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

B. WHALEN, MALACHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 SMITHFIELD ST
 City PITTSBURGH State PA Zip Code 15222-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MALACHY WHALEN & CO. INC. Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 524.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.384769
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

C. WHALEN, MALACHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 SMITHFIELD ST
 City PITTSBURGH State PA Zip Code 15222-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MALACHY WHALEN & CO. INC. Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 524.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : SA11A.419584
 Amount of Each Receipt this Period 131.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	393.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5148 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11A.344305
 Amount of Each Receipt this Period
 75.00
 Memo Item
CONTRIBUTION

B. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350586
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350587
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5149 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350592
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.350593
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363079
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5150 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374716
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381802
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.383226
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5151 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2016
Transaction ID : SA11A.389184
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396609
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

C. WHATLEY, SAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 832
 City LONE STAR State TX Zip Code 75668-0832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEEIRNG Occupation (for Individual) ELEC. ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408228
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5152 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEATLEY, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25292 DARTMOUTH LANE
 City DANA POINT State CA Zip Code 92629-2941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414890
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WHEATLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2263 FLORA STREET
 City SAN LUIS OBISPO State CA Zip Code 93401-4613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357226
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHEATLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2263 FLORA STREET
 City SAN LUIS OBISPO State CA Zip Code 93401-4613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.363840
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5153 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEATLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2263 FLORA STREET
 City SAN LUIS OBISPO State CA Zip Code 93401-4613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **08 / 26 / 2016**
Transaction ID : SA11A.380427
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WHEATLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2263 FLORA STREET
 City SAN LUIS OBISPO State CA Zip Code 93401-4613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 19 / 2016**
Transaction ID : SA11A.399407
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WHEATLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2915 HARBOR VIEW DRIVE
 City CORONA DEL MAR State CA Zip Code 92625-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERRILL LYNCH Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383999
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5154 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, DON, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2954 LOS ALISOS DRIVE
 City FALLBROOK State CA Zip Code 92028-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352648
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WHEELER, DON, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2954 LOS ALISOS DRIVE
 City FALLBROOK State CA Zip Code 92028-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361951
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHEELER, DON, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2954 LOS ALISOS DRIVE
 City FALLBROOK State CA Zip Code 92028-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368255
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5155 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, DON, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2954 LOS ALISOS DRIVE
 City FALLBROOK State CA Zip Code 92028-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415221
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WHEELER, FLORENCE, F., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 N MAYFLOWER ROAD
 City LAKE FOREST State IL Zip Code 60045-2421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.347851
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5375.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381751
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5156 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5375.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386559
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5375.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390966
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5375.00

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.390967
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5157 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016
Transaction ID : SA11A.400813
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419230
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WHEELER, THOMAS, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD,N
 502
 City NAPLES State FL Zip Code 34102-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.423123
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5158 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHIPPLE, LAWRENCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 CANNON COURT
 City BASKING RIDGE State NJ Zip Code 07920-3842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MSW CAPITAL, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412926
 Amount of Each Receipt this Period 225.00
 Memo Item
CONTRIBUTION

B. WHIRLEY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 SHADOWWOOD
 City OVILLA State TX Zip Code 75154-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350373
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

C. WHIRLEY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 SHADOWWOOD
 City OVILLA State TX Zip Code 75154-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357450
 Amount of Each Receipt this Period 25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5159 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHIRLEY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 SHADOWWOOD
 City OVILLA State TX Zip Code 75154-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368496
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WHIRLEY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 SHADOWWOOD
 City OVILLA State TX Zip Code 75154-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382080
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHIRLEY, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 SHADOWWOOD
 City OVILLA State TX Zip Code 75154-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382094
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5160 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHIRLEY, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 327 SHADOWWOOD
City OVILLA State TX Zip Code 75154-1423
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382095
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WHIRLEY, CARL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 327 SHADOWWOOD
City OVILLA State TX Zip Code 75154-1423
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411239
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHITACRE, DORWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4310 FOREST PARK DRIVE 106
City FAIRFAX State VA Zip Code 22030-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344434
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5161 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WHITACRE, DORWIN, , ,		Date of Receipt MM / DD / YYYY 08 / 01 / 2016 Transaction ID : SA11A.358992
Mailing Address 4310 FOREST PARK DRIVE 106		Amount of Each Receipt this Period 50.00
City FAIRFAX	State VA	Zip Code 22030-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WHITACRE, DORWIN, , ,		Date of Receipt MM / DD / YYYY 09 / 01 / 2016 Transaction ID : SA11A.387841
Mailing Address 4310 FOREST PARK DRIVE 106		Amount of Each Receipt this Period 50.00
City FAIRFAX	State VA	Zip Code 22030-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WHITEHEAD, ALBERT, E., MR.,		Date of Receipt MM / DD / YYYY 07 / 11 / 2016 Transaction ID : SA11A.346854
Mailing Address 3214 E 73RD STREET		Amount of Each Receipt this Period 100.00
City TULSA	State OK	Zip Code 74136-5927
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) EMPIRE PETROLEUM CORP.	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5162 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, BEVERLY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9176 SYDNEY LANE

City BRENTWOOD	State TN	Zip Code 37027-8149
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11A.381090

Amount of Each Receipt this Period

70.00

Memo Item
CONTRIBUTION

B. WHITE, BEVERLY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9176 SYDNEY LANE

City BRENTWOOD	State TN	Zip Code 37027-8149
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : SA11A.400366

Amount of Each Receipt this Period

50.00

Memo Item
CONTRIBUTION

C. WHITE, BEVERLY, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9176 SYDNEY LANE

City BRENTWOOD	State TN	Zip Code 37027-8149
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
361.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2016

Transaction ID : SA11A.412471

Amount of Each Receipt this Period

75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	195.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5163 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITEHAIR, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 JOHN K DRIVE UNIT 103
 City LONG BEACH State CA Zip Code 90803-6349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415318
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WHITE, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81811 PRISM DR
 City LA QUINTA State CA Zip Code 92253-7722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380092
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. WHITE, DUNCAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9694 E LEGACY LANE
 City SCOTTSDALE State AZ Zip Code 85255-6331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353731
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5164 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, DUNCAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9694 E LEGACY LANE
 City SCOTTSDALE State AZ Zip Code 85255-6331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370519
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WHITEHORN, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 LONGVIEW COURT
 City DANVILLE State CA Zip Code 94526-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.361946
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

C. WHITEHORN, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 LONGVIEW COURT
 City DANVILLE State CA Zip Code 94526-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 03 / 2016
Transaction ID : SA11A.389233
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5165 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITELEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4679 MEADOW SPRINGS DR
 City WATKINSVILLE State GA Zip Code 30677-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCAA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.380083
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WHITELEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4679 MEADOW SPRINGS DR
 City WATKINSVILLE State GA Zip Code 30677-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCAA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394044
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WHITELEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4679 MEADOW SPRINGS DR
 City WATKINSVILLE State GA Zip Code 30677-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCAA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415110
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5166 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 STAR POINT LANE
 City NAPLES State FL Zip Code 34112-4232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370370
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WHITE, MILES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 GREEN BAY RD
 City LAKE FOREST State IL Zip Code 60045-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABORATORIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20400.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11A.361539
 Amount of Each Receipt this Period 5400.00
 Memo Item CONTRIBUTION

C. WHITE, MILES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 GREEN BAY RD
 City LAKE FOREST State IL Zip Code 60045-1107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBOTT LABORATORIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20400.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391333
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 20500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5167 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITEHOUSE, RONALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4780 CATTERTON RD
 City FREE UNION State VA Zip Code 22940-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372840
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WHITEHOUSE, RONALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4780 CATTERTON RD
 City FREE UNION State VA Zip Code 22940-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372843
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WHITEHOUSE, RONALD, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4780 CATTERTON RD
 City FREE UNION State VA Zip Code 22940-1904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408309
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5168 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, WENDELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15740 S OUTLOOK TER
 City OREGON CITY State OR Zip Code 97045-9251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WENDELL WHITE VENTURES Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.381552
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 WEST 17TH STREET 1702
 City NEW YORK State NY Zip Code 10011-5811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIREFLY CREATIVE ENTERTAINMENT GROUP, Occupation (for Individual) FILM/TV PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.352788
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 WEST 17TH STREET 1702
 City NEW YORK State NY Zip Code 10011-5811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIREFLY CREATIVE ENTERTAINMENT GROUP, Occupation (for Individual) FILM/TV PRODUCER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360242
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5169 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 WEST 17TH STREET
 1702
 City NEW YORK State NY Zip Code 10011-5811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIREFLY CREATIVE ENTERTAINMENT GROUP, Occupation (for Individual) FILM/TV PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2016
Transaction ID : SA11A.360244
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 WEST 17TH STREET
 1702
 City NEW YORK State NY Zip Code 10011-5811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIREFLY CREATIVE ENTERTAINMENT GROUP, Occupation (for Individual) FILM/TV PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.381849
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WHITE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 WEST 17TH STREET
 1702
 City NEW YORK State NY Zip Code 10011-5811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIREFLY CREATIVE ENTERTAINMENT GROUP, Occupation (for Individual) FILM/TV PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.405933
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5170 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITE, WILLIAM, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3562 MEADOW GLEN CT
 City CLEMMONS State NC Zip Code 27012-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357652
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WHITE, WILLIAM, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3562 MEADOW GLEN CT
 City CLEMMONS State NC Zip Code 27012-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382736
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHITE, WILLIAM, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3562 MEADOW GLEN CT
 City CLEMMONS State NC Zip Code 27012-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413081
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5171 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITHAM, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 BARTRAM DRIVE
 City REDDING State CT Zip Code 06896-1508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380690
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WHITING, TAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1135 S. ROBIN LANE
 City MESA State AZ Zip Code 85204-5505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTESSORI ED CTR Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415339
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WHITING, TAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1135 S. ROBIN LANE
 City MESA State AZ Zip Code 85204-5505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTESSORI ED CTR Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415341
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5172 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITING, TAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1135 S. ROBIN LANE
 City MESA State AZ Zip Code 85204-5505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTESSORI ED CTR Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.415342
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WHITLOW, BOBBY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14609 41ST AVE CT NW
 City GIG HARBOR State WA Zip Code 98332-9042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355764
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WHITLOW, BOBBY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14609 41ST AVE CT NW
 City GIG HARBOR State WA Zip Code 98332-9042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380715
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5173 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITLOW, BOBBY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14609 41ST AVE CT NW
 City GIG HARBOR State WA Zip Code 98332-9042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.404404
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WHITLOW, BOBBY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14609 41ST AVE CT NW
 City GIG HARBOR State WA Zip Code 98332-9042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405873
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WHITLOW, BOBBY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14609 41ST AVE CT NW
 City GIG HARBOR State WA Zip Code 98332-9042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.405874
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5174 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITLOW, BOBBY, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14609 41ST AVE CT NW
 City GIG HARBOR State WA Zip Code 98332-9042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407999
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WHITMORE, EDGAR, F., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 S ORANGE GROVE BOULEVARD APT K
 City PASADENA State CA Zip Code 91105-1789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.351139
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WHITMORE, EDGAR, F., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 S ORANGE GROVE BOULEVARD APT K
 City PASADENA State CA Zip Code 91105-1789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.361156
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5175 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITMORE, EDGAR, F., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 660 S ORANGE GROVE BOULEVARD
APT K

City PASADENA	State CA	Zip Code 91105-1789
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394747

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WHITMAN, MARGARET, C., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 EDGE RD

City ATHERTON	State CA	Zip Code 94027-2226
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HEWLETT PACKARD CO	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363938

Amount of Each Receipt this Period
17700.00

Memo Item
CONTRIBUTION

C. WHITMIRE, PAUL, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22405 59TH PLACE W

City MOUNTLAKE TERRACE	State WA	Zip Code 98043-3701
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.397128

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	18050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5176 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITTLESEY, CURTIS, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1880 BROOKWOOD AVENUE
 APT 509
 City BURLINGTON State NC Zip Code 27215-3206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2016
Transaction ID : SA11A.358631
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WHITTLESEY, CURTIS, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1880 BROOKWOOD AVENUE
 APT 509
 City BURLINGTON State NC Zip Code 27215-3206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406801
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WHITTLESEY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2475A PASEO DE LAS AMERICAS
 STE 3511
 City SAN DIEGO State CA Zip Code 92154-7223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERSYS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359903
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 347.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5177 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WHITTLESEY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2475A PASEO DE LAS AMERICAS
 STE 3511
 City SAN DIEGO State CA Zip Code 92154-7223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERSYS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384756
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

B. WHITTLESEY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2475A PASEO DE LAS AMERICAS
 STE 3511
 City SAN DIEGO State CA Zip Code 92154-7223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENERSYS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419567
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

C. WHITTAKER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11015 GATEWOOD DR
 SUITE 103
 City LAKEWOOD RANCH State FL Zip Code 34211-4942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IQC, INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399488
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 544.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5178 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WICE, R. JOYCE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2100 SHILOH VALLEY DRIVE NW, APT 1
APT. 1215

City KENNESAW State GA Zip Code 30144-3181

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOTAL SYSTEMS SERVICES Occupation (for Individual) SOFTWARE DEVELOPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2016
Transaction ID : SA11A.361472

Amount of Each Receipt this Period 300.00

Memo Item CONTRIBUTION

B. WICHMANN, ROBERT, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 326 BAMBERG DRIVE

City BLUFFTON State SC Zip Code 29910-4898

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378173

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. WICHMANN, ROBERT, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 326 BAMBERG DRIVE

City BLUFFTON State SC Zip Code 29910-4898

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392654

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5179 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIEDEMANN, T., J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5960 E TERRITORY AVENUE
 City TUCSON State AZ Zip Code 85750-1804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.380985
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WIEGAND, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 KENWOOD AVE
 City DAVENPORT State IA Zip Code 52803-3634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349915
 Amount of Each Receipt this Period 118.00
 Memo Item CONTRIBUTION

C. WIEGAND, LIGIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3802 N.E. 207 STREET #901
 City AVENTURA State FL Zip Code 33180-3851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357199
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	568.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5180 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIEGAND, LIGIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3802 N.E. 207 STREET #901

City AVENTURA State FL Zip Code 33180-3851

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2016

Transaction ID : SA11A.398145

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. WIEGAND, LIGIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3802 N.E. 207 STREET #901

City AVENTURA State FL Zip Code 33180-3851

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016

Transaction ID : SA11A.410643

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. WIENS, LEWIS, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 148 LAKESHORE DRIVE W

City LAKE QUIVIRA State KS Zip Code 66217-8694

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRUE NORTH HOTEL GROUP Occupation (for Individual) EMPLOYEE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 29 / 2016

Transaction ID : SA11A.357941

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5181 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIENS, LEWIS, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 LAKESHORE DRIVE W
 City LAKE QUIVIRA State KS Zip Code 66217-8694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRUE NORTH HOTEL GROUP Occupation (for Individual) EMPLOYEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376566
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WIESE, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 PARKSIDE DRIVE
 City PALO ALTO State CA Zip Code 94306-4530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374151
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WIESTER, GEORGIA, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7760 SANTA ROSA RD
 City BUELLTON State CA Zip Code 93427-9421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1831.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.349817
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5182 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIESTER, GEORGIA, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7760 SANTA ROSA RD
 City BUELLTON State CA Zip Code 93427-9421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1831.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.349820
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WIESTER, GEORGIA, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7760 SANTA ROSA RD
 City BUELLTON State CA Zip Code 93427-9421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1831.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.351944
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WIESTER, GEORGIA, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7760 SANTA ROSA RD
 City BUELLTON State CA Zip Code 93427-9421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1831.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.363071
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5183 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIESTER, GEORGIA, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7760 SANTA ROSA RD

City BUELLTON	State CA	Zip Code 93427-9421
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1831.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402797

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. WIESTER, GEORGIA, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7760 SANTA ROSA RD

City BUELLTON	State CA	Zip Code 93427-9421
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1831.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.411506

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WIGDER, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3863 NW 53RD STREET

City BOCA RATON	State FL	Zip Code 33496-2703
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WIGDER INVESTEMENT GROUP, LLC	Occupation (for Individual) DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418674

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5184 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIGGANS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12631 HINTON WAY
 City SANTA ANA State CA Zip Code 92705-1458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BE Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417986
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WILCOX, JANE ANN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N984 19TH ROAD
 City WAUTOMA State WI Zip Code 54982-8337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349241
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WILCOX, JANE ANN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N984 19TH ROAD
 City WAUTOMA State WI Zip Code 54982-8337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.406016
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5185 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILCOX, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 ACCORD COURT

City POTOMAC	State MD	Zip Code 20854-4339
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARKWOOD HOMES LTD	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11A.362830

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. WILDER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13011 E ASPEN BLUFF LANE

City SPOKANE	State WA	Zip Code 99217-9809
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2016

Transaction ID : SA11A.362847

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. WILDER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 270 RIDGECREST CIRCLE
213

City LEWISBURG	State PA	Zip Code 17837-6346
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.391131

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5186 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILDER, HENRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3301 TRIPP ROAD

City WOODSIDE	State CA	Zip Code 94062-3631
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368118

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WILDERMUTH, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 EDGECLIFF PLACE, APT 1151

City CINCINNATI	State OH	Zip Code 45206-2853
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.406529

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WILEY, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1804 LAKESIDE LANE

City FRIENDSWOOD	State TX	Zip Code 77546-5862
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KELLY SERVICES	Occupation (for Individual) CHEMICAL ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402251

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5187 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILEY, LAWRENCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 108 N GREEN BAY ROAD

City APPLETON	State WI	Zip Code 54911-5625
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AKIN GUMP	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.383547

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WILEY, PAULA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1804 LAKESIDE LANE

City FRIENDSWOOD	State TX	Zip Code 77546-5862
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHEVRON PHILLIP CHEMICALS	Occupation (for Individual) CHEMICAL ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2016

Transaction ID : SA11A.395822

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WILFORD, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 KESWICK CT.

City SUGAR LAND	State TX	Zip Code 77478-3950
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

Transaction ID : SA11A.357476

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5188 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374514
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382783
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399550
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5189 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILFORD, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 KESWICK CT.
 City SUGAR LAND State TX Zip Code 77478-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413022
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350943
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350945
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5190 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372336
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **08 / 19 / 2016**
Transaction ID : SA11A.374735
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **09 / 06 / 2016**
Transaction ID : SA11A.390429
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5191 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399654
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 17 / 2016
Transaction ID : SA11A.400146
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5192 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422622
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422623
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422624
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5193 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 884 PEBBLEBROOK
 City EAST LANSING State MI Zip Code 48823-2164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANSING OPHTHALMOLOGY Occupation (for Individual) OPHTHALMOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422673
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILHOITE, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15500 EMERALD COAST WAY #1406B
 City DESTIN State FL Zip Code 32541-8578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381282
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. WILKES, CLYDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5514 RACCOON ROAD
 City MANNING State SC Zip Code 29102-6640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389518
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5194 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILKES, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 S BROADWAY ROAD

City AZLE	State TX	Zip Code 76020-3709
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 08 / 2016
Transaction ID : SA11A.361434

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WILKE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324STONEBRIDGE BLVD

City SAINT PAUL	State MN	Zip Code 55105-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.386829

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WILKE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324STONEBRIDGE BLVD

City SAINT PAUL	State MN	Zip Code 55105-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11A.419376

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5195 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILKINS, B. J., , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1251 SALWAY AVENUE SW
 City NORTH CANTON State OH Zip Code 44720-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373650
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILKINS, B. J., , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1251 SALWAY AVENUE SW
 City NORTH CANTON State OH Zip Code 44720-3451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.396398
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WILLARD, HENRY, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3269
 City SHEPHERDSTOWN State WV Zip Code 25443-3269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378258
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 550.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5196 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLARD, HENRY, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3269
 City SHEPHERDSTOWN State WV Zip Code 25443-3269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417074
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WILLARD, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9713 OLD DELL TRACE
 City HENRICO State VA Zip Code 23238-5735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALTRIA GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.406493
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. WILLBANKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 HODGE COURT
 City MORRISTOWN State TN Zip Code 37814-6155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMBLEN PEDIATRIC ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372886
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5197 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLBANKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 HODGE COURT
 City MORRISTOWN State TN Zip Code 37814-6155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMBLÉN PEDIATRIC ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **08 / 18 / 2016**
Transaction ID : SA11A.372887
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILLBANKS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 HODGE COURT
 City MORRISTOWN State TN Zip Code 37814-6155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMBLÉN PEDIATRIC ASSOCIATES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **09 / 02 / 2016**
Transaction ID : SA11A.389265
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLCOXON, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 FALCON HILLS DR
 City HIGHLANDS RANCH State CO Zip Code 80126-2901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383802
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5198 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ADELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6341 E PLAYER CIRCLE
 City MESA State AZ Zip Code 85215-1592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344530
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

B. WILLIAMS, ADELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6341 E PLAYER CIRCLE
 City MESA State AZ Zip Code 85215-1592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 01 / 2016
Transaction ID : SA11A.344531
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. WILLIAMS, ADELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6341 E PLAYER CIRCLE
 City MESA State AZ Zip Code 85215-1592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397657
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5199 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ADELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6341 E PLAYER CIRCLE
 City MESA State AZ Zip Code 85215-1592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397658
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIAMS, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 PELICAN POINT DR
 City NEWPORT COAST State CA Zip Code 92657-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CWSWG INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.360251
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WILLIAMS, BYRON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 PELICAN POINT DR
 City NEWPORT COAST State CA Zip Code 92657-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CWSWG INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388335
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5200 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, BYRON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 PELICAN POINT DR

City NEWPORT COAST	State CA	Zip Code 92657-2006
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CWSWG INC	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417963

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WILLIAMS, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3013 MEINHOLD RD

City LANGLEY	State WA	Zip Code 98260-9807
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407396

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WILLIAMS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2001 HALLUM ST.

City CLOVIS	State NM	Zip Code 88101-8685
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILLIAMS INSURANCE LLC	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350430

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5201 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 HALLUM ST.
 City CLOVIS State NM Zip Code 88101-8685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS INSURANCE LLC Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358101
 Amount of Each Receipt this Period 55.00
 Memo Item CONTRIBUTION

B. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1452 PIERCE STREET
 City BIRMINGHAM State MI Zip Code 48009-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388148
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1452 PIERCE STREET
 City BIRMINGHAM State MI Zip Code 48009-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388149
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5202 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 HALLUM ST.
 City CLOVIS State NM Zip Code 88101-8685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAMS INSURANCE LLC Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401212
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILLIAMS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1452 PIERCE STREET
 City BIRMINGHAM State MI Zip Code 48009-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419043
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILLIAMS, DAVE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 AVENUE OF THE AMERICAS 38TH F
 City NEW YORK State NY Zip Code 10019-5434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.398479
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5203 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3805 FENCHURCH RD
 City BALTIMORE State MD Zip Code 21218-1854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) FEDERAL POLICY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.354659
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILLIAMSON, DELBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 WINDING OAK LANE
 City WELLINGTON State FL Zip Code 33414-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407759
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WILLIAMS, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 80892
 City CONYERS State GA Zip Code 30013-8892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.412917
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5204 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, EVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 S PARKVIEW AV
 City COLUMBUS State OH Zip Code 43209-1686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANKLIN INTERNATIONAL Occupation (for Individual) PRESIDENT & COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348785
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, EVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 S PARKVIEW AV
 City COLUMBUS State OH Zip Code 43209-1686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANKLIN INTERNATIONAL Occupation (for Individual) PRESIDENT & COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348797
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WILLIAMS, EVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 S PARKVIEW AV
 City COLUMBUS State OH Zip Code 43209-1686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRANKLIN INTERNATIONAL Occupation (for Individual) PRESIDENT & COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372628
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5205 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 EAST ST NE
 City VIENNA State VA Zip Code 22180-3577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349503
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WILLIAMS, GENELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5430 SHETLAND CT.
 City LITTLETON State CO Zip Code 80130-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2016
Transaction ID : SA11A.359935
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

C. WILLIAMS, GENELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5430 SHETLAND CT.
 City LITTLETON State CO Zip Code 80130-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384814
 Amount of Each Receipt this Period
 59.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	368.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5206 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, GENELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5430 SHETLAND CT.

City LITTLETON	State CO	Zip Code 80130-3902
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419587

Amount of Each Receipt this Period
59.00

Memo Item CONTRIBUTION

B. WILLIE, HEAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 B PINE RIDGE LANE

City HUNTSVILLE	State TX	Zip Code 77340-2546
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355520

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. WILLIE, HEAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 B PINE RIDGE LANE

City HUNTSVILLE	State TX	Zip Code 77340-2546
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403178

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	409.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5207 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIE, HEAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 B PINE RIDGE LANE

City HUNTSVILLE	State TX	Zip Code 77340-2546
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.403187

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WILLIS, J., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8450 POTOBAC SHORES ROAD

City PORT TOBACCO	State MD	Zip Code 20677-2072
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE WILLS GROUP	Occupation (for Individual) EXEC
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.360908

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. WILLIAMS, JEFFREY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 636 MOUNTAIN VIEW DR

City LEWISTON	State NY	Zip Code 14092-1910
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385224

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5208 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLINGHAM, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2512 ETNA ST.

City BERKELEY	State CA	Zip Code 94704-3115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016

Transaction ID : SA11A.347487

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILLINGHAM, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2512 ETNA ST.

City BERKELEY	State CA	Zip Code 94704-3115
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016

Transaction ID : SA11A.410443

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WILLIAMS, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 E SPUR AVENUE

City GILBERT	State AZ	Zip Code 85296-2344
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11A.365636

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5209 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WILLIAMS, KENNETH, , ,			Date of Receipt MM / DD / YYYY 09 / 29 / 2016 Transaction ID : SA11A.414756
Mailing Address 430 E SPUR AVENUE			Amount of Each Receipt this Period 200.00
City GILBERT	State AZ	Zip Code 85296-2344	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILLIAMS JR, L, THOMAS, ,			Date of Receipt MM / DD / YYYY 07 / 06 / 2016 Transaction ID : SA11A.346065
Mailing Address 2020 BRUCK ST			Amount of Each Receipt this Period 2500.00
City COLUMBUS	State OH	Zip Code 43207-2329	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) FRANKLIN INTERNATIONAL	Occupation (for Individual) EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WILLIAMS JR, L, THOMAS, ,			Date of Receipt MM / DD / YYYY 09 / 08 / 2016 Transaction ID : SA11A.392213
Mailing Address 2020 BRUCK ST			Amount of Each Receipt this Period 1000.00
City COLUMBUS	State OH	Zip Code 43207-2329	<input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) FRANKLIN INTERNATIONAL	Occupation (for Individual) EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 3500.00		

SUBTOTAL of Receipts This Page (optional).....▶	3700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5210 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322HORSESHOE RD
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11A.347655
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322HORSESHOE RD
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372370
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322HORSESHOE RD
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.389013
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5211 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322HORSESHOE RD
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411036
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILLIAMS, LEAH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322HORSESHOE RD
 City MORGANTOWN State WV Zip Code 26508-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411038
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIAMS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4678 E. FOOTHILL DR.
 City PARADISE VALLEY State AZ Zip Code 85253-2916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) NETWORK MRKG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 04 / 2016
Transaction ID : SA11A.344206
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5212 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WILLIAMS, LINDA, , ,		Date of Receipt MM / DD / YYYY 07 / 14 / 2016 Transaction ID : SA11A.347400
Mailing Address 4678 E. FOOTHILL DR.		Amount of Each Receipt this Period 25.00
City PARADISE VALLEY	State AZ	Zip Code 85253-2916
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) NETWORK MRKG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILLIAMS, LINDA, , ,		Date of Receipt MM / DD / YYYY 08 / 04 / 2016 Transaction ID : SA11A.362448
Mailing Address 4678 E. FOOTHILL DR.		Amount of Each Receipt this Period 25.00
City PARADISE VALLEY	State AZ	Zip Code 85253-2916
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) NETWORK MRKG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WILLIAMS, LINDA, , ,		Date of Receipt MM / DD / YYYY 09 / 04 / 2016 Transaction ID : SA11A.389180
Mailing Address 4678 E. FOOTHILL DR.		Amount of Each Receipt this Period 25.00
City PARADISE VALLEY	State AZ	Zip Code 85253-2916
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) NETWORK MRKG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5213 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIS, LLOY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12039 STONE CROSSING CIRCLE
 City TAMPA State FL Zip Code 33635-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANSELL GROUP Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 06 / 2016
Transaction ID : SA11A.363315
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIS, LLOY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12039 STONE CROSSING CIRCLE
 City TAMPA State FL Zip Code 33635-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANSELL GROUP Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 06 / 2016
Transaction ID : SA11A.363316
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIS, LLOY, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12039 STONE CROSSING CIRCLE
 City TAMPA State FL Zip Code 33635-6228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANSELL GROUP Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : SA11A.383230
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5214 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIS, LLOY, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12039 STONE CROSSING CIRCLE

City TAMPA	State FL	Zip Code 33635-6228
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANSELL GROUP	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.383231

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILLIS, LLOY, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12039 STONE CROSSING CIRCLE

City TAMPA	State FL	Zip Code 33635-6228
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANSELL GROUP	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.412649

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILLIAMS, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7900 GLENBROOK ROAD

City BETHESDA	State MD	Zip Code 20814-2404
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.354445

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5215 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SA11A.365156

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.369047

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374546

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5216 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374547

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.399695

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILLIAMS, PAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23598 LAKE VALLEY DRIVE

City MORENO VALLEY	State CA	Zip Code 92557-3950
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICKY STERLING	Occupation (for Individual) IHSS
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.410472

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5217 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WILLIAMS, PAMELA, B., MRS.,

Mailing Address **272 OAKWOOD ROAD**

City ENGLEWOOD	State NJ	Zip Code 07631-2026
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
07 / 19 / 2016

Transaction ID : SA11A.350888

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WILLIAMS, PAMELA, B., MRS.,

Mailing Address **272 OAKWOOD ROAD**

City ENGLEWOOD	State NJ	Zip Code 07631-2026
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
08 / 12 / 2016

Transaction ID : SA11A.366983

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WILLIAMS, PAMELA, B., MRS.,

Mailing Address **272 OAKWOOD ROAD**

City ENGLEWOOD	State NJ	Zip Code 07631-2026
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
08 / 16 / 2016

Transaction ID : SA11A.370639

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5218 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WILLIAMS, PAMELA, B., MRS.,		Date of Receipt MM / DD / YYYY 08 / 31 / 2016 Transaction ID : SA11A.385963
Mailing Address 272 OAKWOOD ROAD		Amount of Each Receipt this Period 50.00
City ENGLEWOOD	State NJ	Zip Code 07631-2026
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILLIAMS, PAMELA, B., MRS.,		Date of Receipt MM / DD / YYYY 09 / 19 / 2016 Transaction ID : SA11A.399261
Mailing Address 272 OAKWOOD ROAD		Amount of Each Receipt this Period 50.00
City ENGLEWOOD	State NJ	Zip Code 07631-2026
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WILLIAMS, PAMELA, B., MRS.,		Date of Receipt MM / DD / YYYY 09 / 25 / 2016 Transaction ID : SA11A.411695
Mailing Address 272 OAKWOOD ROAD		Amount of Each Receipt this Period 200.00
City ENGLEWOOD	State NJ	Zip Code 07631-2026
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5219 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, PETER, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9338 CARRIAGE RUN CIRCLE

City LOVELAND	State OH	Zip Code 45140-5552
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2016

Transaction ID : SA11A.353566

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WILLIAMS, PETER, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9338 CARRIAGE RUN CIRCLE

City LOVELAND	State OH	Zip Code 45140-5552
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.369045

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WILLIAMS, PETER, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9338 CARRIAGE RUN CIRCLE

City LOVELAND	State OH	Zip Code 45140-5552
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2016

Transaction ID : SA11A.401157

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5220 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 731 SOUTHPOINT BLVD

City PETALUMA	State CA	Zip Code 94954-1495
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358093

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 731 SOUTHPOINT BLVD

City PETALUMA	State CA	Zip Code 94954-1495
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Transaction ID : SA11A.362941

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 731 SOUTHPOINT BLVD

City PETALUMA	State CA	Zip Code 94954-1495
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11A.363738

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5221 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.379871
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384118
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 731 SOUTHPOINT BLVD
 City PETALUMA State CA Zip Code 94954-1495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386330
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5222 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1949 POPULAR STREET

City LELAND	State NC	Zip Code 28451-8181
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALEX	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391015

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1949 POPULAR STREET

City LELAND	State NC	Zip Code 28451-8181
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALEX	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : SA11A.391017

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1949 POPULAR STREET

City LELAND	State NC	Zip Code 28451-8181
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALEX	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391701

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5223 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409414
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413393
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415751
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5224 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1949 POPULAR STREET
 City LELAND State NC Zip Code 28451-8181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALEX Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415766
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILLIAMS, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2508 WILD OAK FOREST LANE
 City SEABROOK State TX Zip Code 77586-2631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAKE FOREST EDUCATIONAL CONSULTANTS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378882
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WILLIAMS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2932 BOHICKET ROAD
 City JOHNS ISLAND State SC Zip Code 29455-7211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOARD MEMBER Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381196
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5225 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, WANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 WINCREST FALLS DRIVE
 City CYPRESS State TX Zip Code 77429-5154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383427
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370172
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370857
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5226 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370858
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370859
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370861
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5227 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.370862
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384269
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384285
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5228 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 SCHOONER WAY
 27 SCHOONER WAY
 City SACO State ME Zip Code 04072-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414264
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WILSON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 FOXCHASE DRIVE
 City CANONSBURG State PA Zip Code 15317-5441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPECIFIED SYSTEMS INC. Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.413844
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WILSON, BONUM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 STONO DRIVE
 City CHARLESTON State SC Zip Code 29412-2044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.360984
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5229 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, CAROL, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2197 SUTTER VIEW LANE
 City LINCOLN State CA Zip Code 95648-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348640
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WILSON, CAROL, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2197 SUTTER VIEW LANE
 City LINCOLN State CA Zip Code 95648-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348652
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WILSON, CAROL, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2197 SUTTER VIEW LANE
 City LINCOLN State CA Zip Code 95648-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372717
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5230 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, CAROL, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2197 SUTTER VIEW LANE

City LINCOLN	State CA	Zip Code 95648-7718
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374935

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

B. WILSON, CAROL, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2197 SUTTER VIEW LANE

City LINCOLN	State CA	Zip Code 95648-7718
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398859

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILSON, CAROL, R., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2197 SUTTER VIEW LANE

City LINCOLN	State CA	Zip Code 95648-7718
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398860

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5231 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, CAROL, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2197 SUTTER VIEW LANE
 City LINCOLN State CA Zip Code 95648-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398861
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WILSON, CAROL, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2197 SUTTER VIEW LANE
 City LINCOLN State CA Zip Code 95648-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399710
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. WILSON, CAROL, R., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2197 SUTTER VIEW LANE
 City LINCOLN State CA Zip Code 95648-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399912
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5232 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20365 KIRK MONT DRIVE
 City SARATOGA State CA Zip Code 95070-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414266
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILSON, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20365 KIRK MONT DRIVE
 City SARATOGA State CA Zip Code 95070-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414308
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILSON, D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20365 KIRK MONT DRIVE
 City SARATOGA State CA Zip Code 95070-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414311
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5233 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, DAVID, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4551 GULF SHORE BOULEVARD NORTH**
APARTMENT 402

City **NAPLES** State **FL** Zip Code **34103-4600**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 01 / 2016

Transaction ID : SA11A.387640

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. WILSON, E, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **2687 SPANISH RIVER RD**

City **BOCA RATON** State **FL** Zip Code **33432-8132**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **REAL ESTATE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
09 / 21 / 2016

Transaction ID : SA11A.401159

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WILSON, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **960 CARYA COURT**

City **GREAT FALLS** State **VA** Zip Code **22066-1929**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **AUTHOR**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 29 / 2016

Transaction ID : SA11A.414390

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1600.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5234 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 CAVE SPRING RD.

City HUNT	State TX	Zip Code 78024-
--------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BANK OF THE HILLS	Occupation (for Individual) BANKER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347457

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WILSON, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 CAVE SPRING RD.

City HUNT	State TX	Zip Code 78024-
--------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BANK OF THE HILLS	Occupation (for Individual) BANKER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.350247

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WILSON, HAROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 CAVE SPRING RD.

City HUNT	State TX	Zip Code 78024-
--------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BANK OF THE HILLS	Occupation (for Individual) BANKER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.370074

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5235 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 CAVE SPRING RD.
 City HUNT State TX Zip Code 78024-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BANK OF THE HILLS BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398041
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WILSON, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 CAVE SPRING RD.
 City HUNT State TX Zip Code 78024-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BANK OF THE HILLS BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.398076
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WILSON, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 CAVE SPRING RD.
 City HUNT State TX Zip Code 78024-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BANK OF THE HILLS BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400227
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5236 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2016
Transaction ID : SA11A.344289
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2016
Transaction ID : SA11A.344290
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

C. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2016
Transaction ID : SA11A.344291
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5237 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382281
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403741
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403782
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5238 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422621
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WILSON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2551 VISTA DR. E-302
 City JUNEAU State AK Zip Code 99801-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422628
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WILSON, JOANNE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 E BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER OAKS FINANCIAL Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349222
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5239 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JOANNE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 E BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER OAKS FINANCIAL Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.349224
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WILSON, JOANNE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 E BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER OAKS FINANCIAL Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355468
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WILSON, JOANNE, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 E BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVER OAKS FINANCIAL Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366522
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5240 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2571 BAYSHORE DRIVE

City NEWPORT BEACH	State CA	Zip Code 92663-5606
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) URBAN GROUP, INC.	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
09 / 14 / 2016
Transaction ID : SA11A.396629

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WILSON, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2571 BAYSHORE DRIVE

City NEWPORT BEACH	State CA	Zip Code 92663-5606
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) URBAN GROUP, INC.	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
09 / 26 / 2016
Transaction ID : SA11A.411579

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WILSON, LEONARD, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 797 GOODRICH AVENUE

City SAINT PAUL	State MN	Zip Code 55105-3344
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11A.364455

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5241 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, LEONARD, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 797 GOODRICH AVENUE

City SAINT PAUL	State MN	Zip Code 55105-3344
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.414442

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. WILSON, LEONARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4601 BROOKSIDE DRIVE

City ALEXANDRIA	State VA	Zip Code 22312-1408
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417091

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. WILSON, LOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 732 SEVILLE RD

City DENTON	State TX	Zip Code 76205-8495
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2016

Transaction ID : SA11A.357602

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5242 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, LOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 732 SEVILLE RD
City DENTON State TX Zip Code 76205-8495
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.377451
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WILSON, LOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 732 SEVILLE RD
City DENTON State TX Zip Code 76205-8495
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382765
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WILSON, LOYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 732 SEVILLE RD
City DENTON State TX Zip Code 76205-8495
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413013
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5243 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, RANSOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 PARK AVENUE
 City NEW YORK State NY Zip Code 10028-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350368
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WILSON, RP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 CR 383
 City STEPHENVILLE State TX Zip Code 76401-8796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.388214
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WILSON, WILLIAM, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 HORIZON DR. APT 802
 City GRAND JUNCTION State CO Zip Code 81506-1454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MINING EXPLORATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 15 / 2016**
Transaction ID : SA11A.347724
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5244 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WILSON, WORD, , ,		Date of Receipt MM / DD / YYYY 09 / 23 / 2016 Transaction ID : SA11A.405043
Mailing Address 110 WEST LOUISIANA SUITE 200		Amount of Each Receipt this Period 250.00
City MIDLAND	State TX	Zip Code 79701-3414
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) WORD B WILSON	Occupation (for Individual) WORD B WILSON INVESTMENTS LP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WINDER, CAROLE, , ,		Date of Receipt MM / DD / YYYY 07 / 21 / 2016 Transaction ID : SA11A.354022
Mailing Address 3725 ROHLFFS WAY		Amount of Each Receipt this Period 33.00
City NAPA	State CA	Zip Code 94558-4485
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WINDER, CAROLE, , ,		Date of Receipt MM / DD / YYYY 08 / 26 / 2016 Transaction ID : SA11A.380273
Mailing Address 3725 ROHLFFS WAY		Amount of Each Receipt this Period 33.00
City NAPA	State CA	Zip Code 94558-4485
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 214.00	

SUBTOTAL of Receipts This Page (optional).....▶	316.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5245 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINDER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 ROHLFFS WAY
 City NAPA State CA Zip Code 94558-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409402
 Amount of Each Receipt this Period 33.00
 Memo Item CONTRIBUTION

B. WINDER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 ROHLFFS WAY
 City NAPA State CA Zip Code 94558-4485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409403
 Amount of Each Receipt this Period 33.00
 Memo Item CONTRIBUTION

C. WINDLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 COTTEN DR.
 City DENTON State TX Zip Code 76207-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.349928
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 91.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5246 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINDLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 COTTEN DR.
 City DENTON State TX Zip Code 76207-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383589
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WINDLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 COTTEN DR.
 City DENTON State TX Zip Code 76207-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383596
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WINDLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 COTTEN DR.
 City DENTON State TX Zip Code 76207-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397738
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5247 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINDLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 COTTEN DR.
 City DENTON State TX Zip Code 76207-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397739
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WINDLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3604 COTTEN DR.
 City DENTON State TX Zip Code 76207-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403260
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WINDLE, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 FENWOO ROAD
 City HOUSTON State TX Zip Code 77005-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.421976
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5248 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINDLE, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 FENWOOD ROAD
 City HOUSTON State TX Zip Code 77005-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421978
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WINDLE, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 FENWOOD ROAD
 City HOUSTON State TX Zip Code 77005-3437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.421979
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WINGATE, MONROE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8924 E PINNACLE PEAK RD, STE G5-62
 City SCOTTSDALE State AZ Zip Code 85255-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.411543
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5249 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINGERT, CARA, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 558 BAUGHMAN AVENUE
 City CLAREMONT State CA Zip Code 91711-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364450
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WINGERT, CARA, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 558 BAUGHMAN AVENUE
 City CLAREMONT State CA Zip Code 91711-3732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.373753
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WINIARSKI, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3327
 City YOUNTVILLE State CA Zip Code 94599-3327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF EMPLOYED GRAPE GROWER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.394648
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5250 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WININGDER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 URANIA STREET
 City NEW ORLEANS State LA Zip Code 70130-5239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406721
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WINQUIST, CHRISTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 C STREET
 City ROCKFORD State IL Zip Code 61107-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.364217
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WINQUIST, CHRISTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 C STREET
 City ROCKFORD State IL Zip Code 61107-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371405
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5251 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINQUIST, CHRISTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 C STREET
 City ROCKFORD State IL Zip Code 61107-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.378445
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WINQUIST, CHRISTA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 C STREET
 City ROCKFORD State IL Zip Code 61107-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.411866
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WINSBY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 VILLAGE VIEW DRIVE
 APT 3203
 City CHESTERFIELD State MO Zip Code 63017-1978
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347750
 Amount of Each Receipt this Period
 24.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5252 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSBY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 VILLAGE VIEW DRIVE
APT 3203

City CHESTERFIELD State MO Zip Code 63017-1978

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
324.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.361020

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. WINSBY, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 VILLAGE VIEW DRIVE
APT 3203

City CHESTERFIELD State MO Zip Code 63017-1978

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
324.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2016

Transaction ID : SA11A.377094

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WINSLOW, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 CYPRESS ROAD

City MERRY HILL State NC Zip Code 27957-9515

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUNDSIDE GROUP Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
760.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2016

Transaction ID : SA11A.359833

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5253 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSLOW, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 CYPRESS ROAD
 City MERRY HILL State NC Zip Code 27957-9515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUNDSIDE GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.369100
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WINSLOW, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 CYPRESS ROAD
 City MERRY HILL State NC Zip Code 27957-9515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUNDSIDE GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384368
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WINSTON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 PARTLOW
 City HOUSTON State TX Zip Code 77040-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLCM INC Occupation (for Individual) PREXS.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352476
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5254 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8306 PARTLOW

City HOUSTON	State TX	Zip Code 77040-1519
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLCM INC	Occupation (for Individual) PREXS.
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358123

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WINSTON, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8306 PARTLOW

City HOUSTON	State TX	Zip Code 77040-1519
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLCM INC	Occupation (for Individual) PREXS.
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368594

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WINSTON, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8306 PARTLOW

City HOUSTON	State TX	Zip Code 77040-1519
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CLCM INC	Occupation (for Individual) PREXS.
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375906

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5255 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 PARTLOW
 City HOUSTON State TX Zip Code 77040-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLCM INC Occupation (for Individual) PREXS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386346
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WINSTON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 PARTLOW
 City HOUSTON State TX Zip Code 77040-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLCM INC Occupation (for Individual) PREXS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11A.391806
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. WINSTON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 PARTLOW
 City HOUSTON State TX Zip Code 77040-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLCM INC Occupation (for Individual) PREXS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401502
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5256 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 PARTLOW
 City HOUSTON State TX Zip Code 77040-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLCM INC Occupation (for Individual) PREXS.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.416845
 Amount of Each Receipt this Period 38.00
 Memo Item CONTRIBUTION

B. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.355739
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.372993
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	113.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5257 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.372994
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380712
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407943
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5258 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GRIFFITHS DRIVE
 City DURHAM State NH Zip Code 03824-3128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412690
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

B. WINSTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 KERE TRACE
 City CHEROKEE VILLAGE State AR Zip Code 72529-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394452
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. WINSTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 KERE TRACE
 City CHEROKEE VILLAGE State AR Zip Code 72529-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.414126
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5259 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WINSTON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 KERE TRACE
 City CHEROKEE VILLAGE State AR Zip Code 72529-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.414129
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WINTERS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 HICKORY GROVE WAY
 City SAVANNAH State GA Zip Code 31405-1027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **07 / 31 / 2016**
Transaction ID : SA11A.359197
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WINTERS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 HICKORY GROVE WAY
 City SAVANNAH State GA Zip Code 31405-1027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364820
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5260 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERS, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 HICKORY GROVE WAY

City SAVANNAH	State GA	Zip Code 31405-1027
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386912

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WINTERS, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 HICKORY GROVE WAY

City SAVANNAH	State GA	Zip Code 31405-1027
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.402380

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WINTERS, HARRY, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2845 NORTH SANTA YNEZ PLACE

City TUCSON	State AZ	Zip Code 85715-3141
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGR
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA11A.368199

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5261 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERS, HARRY, J., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2845 NORTH SANTA YNEZ PLACE
 City TUCSON State AZ Zip Code 85715-3141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398698
 Amount of Each Receipt this Period 150.00
 Memo Item
CONTRIBUTION

B. WINTERS, HARRY, J., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2845 NORTH SANTA YNEZ PLACE
 City TUCSON State AZ Zip Code 85715-3141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408482
 Amount of Each Receipt this Period 150.00
 Memo Item
CONTRIBUTION

C. WINTERS, HARRY, J., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2845 NORTH SANTA YNEZ PLACE
 City TUCSON State AZ Zip Code 85715-3141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418589
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5262 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERSTEEN, JAMES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 27 MYRTLE AVE

City MILL VALLEY	State CA	Zip Code 94941-1023
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.362280

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. WINTERSTEEN, JAMES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 27 MYRTLE AVE

City MILL VALLEY	State CA	Zip Code 94941-1023
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374341

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WINTERSTEEN, JAMES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 27 MYRTLE AVE

City MILL VALLEY	State CA	Zip Code 94941-1023
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391662

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5263 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERSTEEN, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 MYRTLE AVE
 City MILL VALLEY State CA Zip Code 94941-1023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391663
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. WINTERSTEEN, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 MYRTLE AVE
 City MILL VALLEY State CA Zip Code 94941-1023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408450
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WINTERSTEEN, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 MYRTLE AVE
 City MILL VALLEY State CA Zip Code 94941-1023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408451
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5264 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERSTEEN, MARYLEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4926 WESTERHAM ST
 City FULSHEAR State TX Zip Code 77441-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.352672
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WINTERSTEEN, MARYLEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4926 WESTERHAM ST
 City FULSHEAR State TX Zip Code 77441-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410598
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WINTERSTEEN, MARYLEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4926 WESTERHAM ST
 City FULSHEAR State TX Zip Code 77441-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.410602
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5265 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WINTERER, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1009
 City BOCA GRANDE State FL Zip Code 33921-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.396396
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. WINZELER, JO ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 SNYDER STREET
 City MONTPELIER State OH Zip Code 43543-1164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2016
Transaction ID : SA11A.392601
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. WIRT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST G35
 City MIAMI State FL Zip Code 33015-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349682
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5266 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIRT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST G35
 City MIAMI State FL Zip Code 33015-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374749
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WIRT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST G35
 City MIAMI State FL Zip Code 33015-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399578
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WIRTH, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31144 WIRTH RD
 City TANGENT State OR Zip Code 97389-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405281
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5267 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIRTH, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31144 WIRTH RD
 City TANGENT State OR Zip Code 97389-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411369
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. WISCHERATH, THOMAS, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 295 MAIN ST
 City WEST SENECA State NY Zip Code 14224-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACI CONTROLS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.383558
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352128
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5268 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373374
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.377479
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WISEMAN, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9810 STATE HEY 220
 City CASPER State WY Zip Code 82604-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400258
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5269 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISEMAN, DENISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9810 STATE HEY 220

City CASPER State WY Zip Code 82604-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.401469

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. WISEMAN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 MEADOWBROOK TER

City GREENSBORO State NC Zip Code 27408-6529

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.364393

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

C. WISEBAKER SR, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1703 WESTFIELD LOOP ROAD

City HOUSTON State TX Zip Code 77073-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WISEBAKER BUILDER SERVICE Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1247.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379023

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5270 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISMAR, NATALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26231 MIRA WAY
 City BONITA SPRINGS State FL Zip Code 34134-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408498
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WITHERSPOON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2194 SANDSTON RD
 City COLUMBUS State OH Zip Code 43220-5403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2016
Transaction ID : SA11A.350320
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WITHERSPOON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2194 SANDSTON RD
 City COLUMBUS State OH Zip Code 43220-5403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.360206
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5271 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348685
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.349999
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350753
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5272 OF 5722

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WITTS, JUDITH, , ,

Mailing Address 1408 J JOPPA FOREST DRIVE
J

City JOPPA State MD Zip Code 21085-3427

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2016

Transaction ID : SA11A.359363

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WITTS, JUDITH, , ,

Mailing Address 1408 J JOPPA FOREST DRIVE
J

City JOPPA State MD Zip Code 21085-3427

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2016

Transaction ID : SA11A.359364

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WITTS, JUDITH, , ,

Mailing Address 1408 J JOPPA FOREST DRIVE
J

City JOPPA State MD Zip Code 21085-3427

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 13 / 2016

Transaction ID : SA11A.366836

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5273 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 08 / 18 / 2016
Transaction ID : SA11A.372720
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : SA11A.373303
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.385056
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5274 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2016
Transaction ID : SA11A.385059
 Amount of Each Receipt this Period
 50.00
 Memo Item CONTRIBUTION

B. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2016
Transaction ID : SA11A.396838
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

C. WITTS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1408 J JOPPA FOREST DRIVE
 J
 City JOPPA State MD Zip Code 21085-3427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2016
Transaction ID : SA11A.399927
 Amount of Each Receipt this Period
 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5275 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WIXOM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5433 W FRESNAL CANYON PLACE
 City MARANA State AZ Zip Code 85658-4308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374815
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WIXOM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5433 W FRESNAL CANYON PLACE
 City MARANA State AZ Zip Code 85658-4308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399693
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WODA, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2315 ARLINGTON AVE
 City COLUMBUS State OH Zip Code 43221-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WODA GROUP, INC. Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367908
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5276 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WODMAN, DEAN, , ,

Mailing Address **233 MOCKINGBIRD TRAIL**

City PALM BEACH	State FL	Zip Code 33480-3117
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 28 / 2016

Transaction ID : SA11A.416441

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WOHLAUER, PETER, , ,

Mailing Address **24 ELLSWORTH AVE**

City CAMBRIDGE	State MA	Zip Code 02139-1038
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 15 / 2016

Transaction ID : SA11A.348289

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WOHLAUER, PETER, , ,

Mailing Address **24 ELLSWORTH AVE**

City CAMBRIDGE	State MA	Zip Code 02139-1038
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 01 / 2016

Transaction ID : SA11A.389365

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5277 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOHLAUER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 ELLSWORTH AVE
 City CAMBRIDGE State MA Zip Code 02139-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402847
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOHLAUER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 ELLSWORTH AVE
 City CAMBRIDGE State MA Zip Code 02139-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402848
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOHLAUER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 ELLSWORTH AVE
 City CAMBRIDGE State MA Zip Code 02139-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415511
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5278 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOHLAUER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 ELLSWORTH AVE
 City CAMBRIDGE State MA Zip Code 02139-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415512
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOJCIECH, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9212 TALISMAN DRIVE
 City VIENNA State VA Zip Code 22182-3434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 544.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.353630
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOJCIECH, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9212 TALISMAN DRIVE
 City VIENNA State VA Zip Code 22182-3434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 544.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357558
 Amount of Each Receipt this Period 147.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	347.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5279 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLCOTT, DEAN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 390
 City MANCOS State CO Zip Code 81328-0390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.366518
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLCOTT, DEAN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 390
 City MANCOS State CO Zip Code 81328-0390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.411783
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOLCOTT, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4624 NW 17TH PLACE
 City GAINESVILLE State FL Zip Code 32605-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376291
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5280 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLCOTT, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4624 NW 17TH PLACE
 City Gainesville State FL Zip Code 32605-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.396891
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLCOTT, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4624 NW 17TH PLACE
 City Gainesville State FL Zip Code 32605-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397454
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOLCOTT, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4624 NW 17TH PLACE
 City Gainesville State FL Zip Code 32605-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403918
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5281 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLCOTT, EDWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4624 NW 17TH PLACE
 City GAINESVILLE State FL Zip Code 32605-3418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403920
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLCOTT, SAMUEL, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 384 DUCK POND ROAD
 City LOCUST VALLEY State NY Zip Code 11560-2405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 23 / 2016
Transaction ID : SA11A.376589
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WOLD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2536 UNIVERSITY DRIVE S UNIT F
 City FARGO State ND Zip Code 58103-5709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392659
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5282 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLF, DON, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11718 AUTUM TREE DRIVE
 City FORT WAYNE State IN Zip Code 46845-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.355831
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

B. WOLFE, JODY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5255 N KENDALL DRIVE
 City MIAMI State FL Zip Code 33156-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.350791
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

C. WOLFE, JODY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5255 N KENDALL DRIVE
 City MIAMI State FL Zip Code 33156-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422247
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5283 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLFE, JODY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5255 N KENDALL DRIVE
 City MIAMI State FL Zip Code 33156-2123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422251
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. WOLFE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5222 SCOTT ROBERTSON ROAD
 City HIDDEN HILLS State CA Zip Code 91302-1168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METROPOLITAN MARKETING, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362168
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WOLFE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5222 SCOTT ROBERTSON ROAD
 City HIDDEN HILLS State CA Zip Code 91302-1168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) METROPOLITAN MARKETING, INC. Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383653
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5284 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLFF, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16023 AVENIDA LAMEGO
 City SAN DIEGO State CA Zip Code 92128-3151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390447
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. WOLL, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3311 WOODVIEW LAKE ROAD
 City W BLOOMFIELD State MI Zip Code 48323-3573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354204
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WOLPOWITZ, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 WILD HORSE CIRCLE
 City BOULDER State CO Zip Code 80304-0459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2016
Transaction ID : SA11A.380307
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5285 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLPOWITZ, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 WILD HORSE CIRCLE

City BOULDER	State CO	Zip Code 80304-0459
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11A.399493

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WOLPOWITZ, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 WILD HORSE CIRCLE

City BOULDER	State CO	Zip Code 80304-0459
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11A.399494

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WOLPOWITZ, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 WILD HORSE CIRCLE

City BOULDER	State CO	Zip Code 80304-0459
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11A.403437

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5286 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLPOWITZ, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 WILD HORSE CIRCLE
 City BOULDER State CO Zip Code 80304-0459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403440
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLPOWITZ, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 WILD HORSE CIRCLE
 City BOULDER State CO Zip Code 80304-0459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408355
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 07 / 03 / 2016
Transaction ID : SA11A.344219
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	309.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5287 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE
 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 08 / 03 / 2016
Transaction ID : SA11A.362042
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

B. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE
 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.362952
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE
 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 08 / 14 / 2016
Transaction ID : SA11A.366728
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	134.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5288 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE
 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 09 / 05 / 2016
Transaction ID : SA11A.389103
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE
 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 09 / 03 / 2016
Transaction ID : SA11A.389222
 Amount of Each Receipt this Period 59.00
 Memo Item CONTRIBUTION

C. WOLTER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 851 O'KEEFFE AVE
 42
 City SUN PRAIRIE State WI Zip Code 53590-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HALLMARK DRYWALL INC Occupation (for Individual) CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418178
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 134.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5289 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11A.363788
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366787
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.372658
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5290 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390981
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 07 / 2016
Transaction ID : SA11A.390983
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396831
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5291 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : SA11A.404701
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417950
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WOLTERS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2408
 City STAUNTON State VA Zip Code 24402-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417965
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5292 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350157
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt **07 / 20 / 2016**
Transaction ID : SA11A.350159
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt **08 / 04 / 2016**
Transaction ID : SA11A.363133
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5293 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363134
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368803
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.387510
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5294 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408504
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419414
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420373
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5295 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLTER, OTTO, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 MONASTERY HILL DRIVE
 City OCONOMOWOC State WI Zip Code 53066-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WISCONSIN LIFT TRUCK CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420375
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOLTOSZ, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 NORTH COLLEGE STREET
 City AUBURN State AL Zip Code 36830-3817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIMULATIONS PLUS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386675
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WONG, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 CURIE COURT
 City IRVINE State CA Zip Code 92617-4026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.363188
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5296 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WONG, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 CURIE COURT

City IRVINE	State CA	Zip Code 92617-4026
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
402.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384531

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WONG, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 CURIE COURT

City IRVINE	State CA	Zip Code 92617-4026
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
402.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.416986

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WONG, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 CURIE COURT

City IRVINE	State CA	Zip Code 92617-4026
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
402.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418265

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5297 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WONG, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 CURIE COURT
 City IRVINE State CA Zip Code 92617-4026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418294
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WONG, WILLIAM, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4432 LUCERA CIRCLE
 City PALOS VERDES ESTAT State CA Zip Code 90274-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11A.354918
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WOOD, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 PRIMROSE WAY
 City PALO ALTO State CA Zip Code 94303-3047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANTHONY J WOOD Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359802
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5298 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372349
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381969
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383812
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5299 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46227 KOAENA PLACE

City KANEEOHE	State HI	Zip Code 96744-4134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.383822

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WOOD, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46227 KOAENA PLACE

City KANEEOHE	State HI	Zip Code 96744-4134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA11A.391198

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WOOD, DOROTHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46227 KOAENA PLACE

City KANEEOHE	State HI	Zip Code 96744-4134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

Transaction ID : SA11A.399998

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5300 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410420
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410430
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422665
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5301 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46227 KOAENA PLACE
 City KANEEOHE State HI Zip Code 96744-4134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.422667
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WOOD, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46-227 KOAENA PL
 City KANEEOHE State HI Zip Code 96744-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379856
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WOOD, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46-227 KOAENA PL
 City KANEEOHE State HI Zip Code 96744-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11A.388343
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5302 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 46-227 KOAENA PL

City KANEHOE	State HI	Zip Code 96744-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398844

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WOOD, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 46-227 KOAENA PL

City KANEHOE	State HI	Zip Code 96744-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398845

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WOOD, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 46-227 KOAENA PL

City KANEHOE	State HI	Zip Code 96744-
-----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : SA11A.398847

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5303 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46-227 KOAENA PL

City KANEEOHE	State HI	Zip Code 96744-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407581

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WOOD, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46-227 KOAENA PL

City KANEEOHE	State HI	Zip Code 96744-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407610

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WOOD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5905 W MEADOWPARK LANE

City CRYSTAL RIVER	State FL	Zip Code 34429-2701
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2016

Transaction ID : SA11A.359847

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	109.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5304 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5905 W MEADOWPARK LANE

City CRYSTAL RIVER	State FL	Zip Code 34429-2701
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.384748

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

B. WOOD, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5905 W MEADOWPARK LANE

City CRYSTAL RIVER	State FL	Zip Code 34429-2701
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419560

Amount of Each Receipt this Period
59.00

Memo Item
CONTRIBUTION

C. WOOD, RICHARD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3775 WEST D. AVE

City KALAMAZOO	State MI	Zip Code 49009-9080
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.385071

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	168.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5305 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390365
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397615
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.400985
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5306 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403295
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403299
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOOD, RICHARD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3775 WEST D. AVE
 City KALAMAZOO State MI Zip Code 49009-9080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413202
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5307 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, RICHARD, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3775 WEST D. AVE

City KALAMAZOO	State MI	Zip Code 49009-9080
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418109

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WOOD, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NOLLKAMPER RD

City BOERNE	State TX	Zip Code 78006-6412
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.419956

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WOOD, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 NOLLKAMPER RD

City BOERNE	State TX	Zip Code 78006-6412
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.419957

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5308 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WOOD, WELDON, , ,			Date of Receipt MM / DD / YYYY 07 / 29 / 2016 Transaction ID : SA11A.358010		
Mailing Address 17 ALVERNO COURT			Amount of Each Receipt this Period 100.00		
City REDWOOD CITY	State CA	Zip Code 94061-1825	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	Aggregate Year-to-Date ▼ 625.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WOOD, WELDON, , ,			Date of Receipt MM / DD / YYYY 07 / 29 / 2016 Transaction ID : SA11A.358011		
Mailing Address 17 ALVERNO COURT			Amount of Each Receipt this Period 100.00		
City REDWOOD CITY	State CA	Zip Code 94061-1825	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	Aggregate Year-to-Date ▼ 625.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WOOD, WELDON, , ,			Date of Receipt MM / DD / YYYY 08 / 29 / 2016 Transaction ID : SA11A.385072		
Mailing Address 17 ALVERNO COURT			Amount of Each Receipt this Period 100.00		
City REDWOOD CITY	State CA	Zip Code 94061-1825	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	Aggregate Year-to-Date ▼ 625.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5309 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, WELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ALVERNO COURT
 City REDWOOD CITY State CA Zip Code 94061-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410759
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOOD, WELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ALVERNO COURT
 City REDWOOD CITY State CA Zip Code 94061-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.410785
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WOOD, WELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 ALVERNO COURT
 City REDWOOD CITY State CA Zip Code 94061-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416190
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5310 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODBURY, J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 BAYSHORE DRIVE
 City FLOWER MOUND State TX Zip Code 75022-5538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.371193
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WOODFORD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 HEARTHSTONE ROAD
 City PINEHURST State NC Zip Code 28374-7093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362266
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. WOODFORD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 HEARTHSTONE ROAD
 City PINEHURST State NC Zip Code 28374-7093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368054
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	675.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5311 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODFORD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 HEARTHSTONE ROAD
 City PINEHURST State NC Zip Code 28374-7093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403792
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOODFORD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 HEARTHSTONE ROAD
 City PINEHURST State NC Zip Code 28374-7093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.422378
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOODHULL, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 JADE AVENUE
 City NEWPORT BEACH State CA Zip Code 92662-1321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.360989
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5312 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODIS, CAROLINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 WHITE HORSE TRAIL

City METAMORA	State IL	Zip Code 61548-8313
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2016

Transaction ID : SA11A.372992

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WOODIS, CAROLINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 WHITE HORSE TRAIL

City METAMORA	State IL	Zip Code 61548-8313
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2016

Transaction ID : SA11A.378912

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. WOODIS, CAROLINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 WHITE HORSE TRAIL

City METAMORA	State IL	Zip Code 61548-8313
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2016

Transaction ID : SA11A.399038

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5313 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODIS, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 WHITE HORSE TRAIL
 City METAMORA State IL Zip Code 61548-8313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.399065
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WOODIS, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 WHITE HORSE TRAIL
 City METAMORA State IL Zip Code 61548-8313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415660
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WOODIS, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 WHITE HORSE TRAIL
 City METAMORA State IL Zip Code 61548-8313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.415661
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5314 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODIS, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 WHITE HORSE TRAIL
 City METAMORA State IL Zip Code 61548-8313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.420000
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WOODRUFF, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5001 NW OLD TRAIL ROAD
 City KANSAS CITY State MO Zip Code 64151-1945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388070
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WOODRUFF, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5001 NW OLD TRAIL ROAD
 City KANSAS CITY State MO Zip Code 64151-1945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388078
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5315 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODRUFF, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5001 NW OLD TRAIL ROAD

City KANSAS CITY	State MO	Zip Code 64151-1945
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALMART	Occupation (for Individual) PHARMACIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419837

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WOODS, ELYSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 94

City TEMECULA	State CA	Zip Code 92593-0094
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.391676

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WOODS, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 765 BLANCHARD AVE

City CHAMBERSBURG	State PA	Zip Code 17201-3609
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380452

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5316 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 BLANCHARD AVE
 City CHAMBERSBURG State PA Zip Code 17201-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404941
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WOODS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 BLANCHARD AVE
 City CHAMBERSBURG State PA Zip Code 17201-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.404943
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WOODS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 BLANCHARD AVE
 City CHAMBERSBURG State PA Zip Code 17201-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 23 / 2016
Transaction ID : SA11A.405015
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5317 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 BLANCHARD AVE
 City CHAMBERSBURG State PA Zip Code 17201-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.405016
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOODS, KAY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3570 JACKSON STREET
 City SAN FRANCISCO State CA Zip Code 94118-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCOTCH PLYWOOD CO Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.393014
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WOODS, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3344 PEACHTREE RD 2050
 City ATLANTA State GA Zip Code 30326-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APA Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.378707
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5318 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODS, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3344 PEACHTREE RD
2050

City ATLANTA State GA Zip Code 30326-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) APA Occupation (for Individual) INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.403961

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WOODS, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2633 MCKINNEY AVE, #130-361

City DALLAS State TX Zip Code 75204-2581

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSULTING FIRM Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348702

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. WOODS, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2633 MCKINNEY AVE, #130-361

City DALLAS State TX Zip Code 75204-2581

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSULTING FIRM Occupation (for Individual) CONSULTANT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2016

Transaction ID : SA11A.348707

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5319 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODS, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2633 MCKINNEY AVE, #130-361
 City DALLAS State TX Zip Code 75204-2581
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTING FIRM Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368993
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WOODS, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14121 MATNEY ROAD
 City KLAMATH FALLS State OR Zip Code 97603-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2016
Transaction ID : SA11A.359434
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WOODS, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14121 MATNEY ROAD
 City KLAMATH FALLS State OR Zip Code 97603-9768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.379009
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5320 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODS, LELAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14121 MATNEY ROAD

City KLAMATH FALLS	State OR	Zip Code 97603-9768
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408766

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. WOODS, LELAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14121 MATNEY ROAD

City KLAMATH FALLS	State OR	Zip Code 97603-9768
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.408767

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. WOODSON, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14285 NAVAJO STREET

City WESTMINSTER	State CO	Zip Code 80023-8441
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STRATPASS CORPORATION	Occupation (for Individual) INTEL ANALYSIS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11A.387242

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5321 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14285 NAVAJO STREET
 City WESTMINSTER State CO Zip Code 80023-8441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATPASS CORPORATION Occupation (for Individual) INTEL ANALYSIS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423068
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WOODSON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14285 NAVAJO STREET
 City WESTMINSTER State CO Zip Code 80023-8441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STRATPASS CORPORATION Occupation (for Individual) INTEL ANALYSIS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.423072
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOODSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2042 DEER RIDGE DRIVE
 City STONE MOUNTAIN State GA Zip Code 30087-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384495
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5322 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODSON, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2042 DEER RIDGE DRIVE

City STONE MOUNTAIN	State GA	Zip Code 30087-1401
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418316

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. WOOLF, JOHN, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4431 N WILSON AVENUE

City FRESNO	State CA	Zip Code 93704-3631
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMING/FOOD PROCESSING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.406994

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WOOLSEY, RICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 234 VENTURE ST.
100

City SAN MARCOS	State CA	Zip Code 92078-4399
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION	Occupation (for Individual) GEN.CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2016

Transaction ID : SA11A.375816

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5323 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WOOLSEY, RICK, , ,			Date of Receipt
Mailing Address 234 VENTURE ST. 100			<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2016"/>
City SAN MARCOS	State CA	Zip Code 92078-4399	Transaction ID : SA11A.375817
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION		Occupation (for Individual) GEN.CONTRACTOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="430.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WOOLSEY, RICK, , ,			Date of Receipt
Mailing Address 234 VENTURE ST. 100			<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City SAN MARCOS	State CA	Zip Code 92078-4399	Transaction ID : SA11A.380440
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION		Occupation (for Individual) GEN.CONTRACTOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="430.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WOOLSEY, RICK, , ,			Date of Receipt
Mailing Address 234 VENTURE ST. 100			<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2016"/>
City SAN MARCOS	State CA	Zip Code 92078-4399	Transaction ID : SA11A.390196
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION		Occupation (for Individual) GEN.CONTRACTOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="430.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="350.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5324 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOLSEY, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 VENTURE ST.
 100
 City SAN MARCOS State CA Zip Code 92078-4399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD & RICHARD CONSTRUCTION Occupation (for Individual) GEN.CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401438
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WOOTTEN, RIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LITTLE RAVEN ST.
 511
 City DENVER State CO Zip Code 80202-6248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11A.346869
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WOOTTEN, RIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 LITTLE RAVEN ST.
 511
 City DENVER State CO Zip Code 80202-6248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.368826
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5325 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WORONOFF, NOGA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 WILLIAM J. HEIGHTS

City FRAMINGHAM	State MA	Zip Code 01702-6134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENGAGE LEARNING	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355727

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. WORONOFF, NOGA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 WILLIAM J. HEIGHTS

City FRAMINGHAM	State MA	Zip Code 01702-6134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENGAGE LEARNING	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2016

Transaction ID : SA11A.380698

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. WORONOFF, NOGA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 WILLIAM J. HEIGHTS

City FRAMINGHAM	State MA	Zip Code 01702-6134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENGAGE LEARNING	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.408002

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5326 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WORRELL, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3529 E 88TH AVENUE
 City ANCHORAGE State AK Zip Code 99507-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389578
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WORTH, BERNARD, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 LEXINGTON AVE S 14
 City SAINT PAUL State MN Zip Code 55118-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373063
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WORTH, BERNARD, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 LEXINGTON AVE S 14
 City SAINT PAUL State MN Zip Code 55118-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373064
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5327 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WORTH, BERNARD, , DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1775 LEXINGTON AVE S
14

City SAINT PAUL State MN Zip Code 55118-3624

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11A.386184

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WORTH, BERNARD, , DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1775 LEXINGTON AVE S
14

City SAINT PAUL State MN Zip Code 55118-3624

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
09 / 15 / 2016
Transaction ID : SA11A.397947

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WORTHINGTON, WALTER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 LAKEFOREST COURT

City WEATHERFORD State TX Zip Code 76087-8009

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
07 / 26 / 2016
Transaction ID : SA11A.354908

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5328 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WREN, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2261 NORTHRIDGE AVENUE CIRCLE N
 City STILLWATER State MN Zip Code 55082-2506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **07 / 01 / 2016**
Transaction ID : SA11A.343867
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WREN, JOHN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2261 NORTHRIDGE AVENUE CIRCLE N
 City STILLWATER State MN Zip Code 55082-2506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.401097
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT OF FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt **07 / 19 / 2016**
Transaction ID : SA11A.349631
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5329 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT OF FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt **07 / 29 / 2016**
Transaction ID : SA11A.358235
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT OF FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.361999
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT OF FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11A.364984
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5330 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 HIGHLAND PARK PLACE

City RYE	State NY	Zip Code 10580-1736
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARINE & INDUSTRIAL	Occupation (for Individual) VICE PRESIDENT OF FINANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1375.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2016

Transaction ID : SA11A.368810

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 HIGHLAND PARK PLACE

City RYE	State NY	Zip Code 10580-1736
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARINE & INDUSTRIAL	Occupation (for Individual) VICE PRESIDENT OF FINANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1375.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2016

Transaction ID : SA11A.390165

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 HIGHLAND PARK PLACE

City RYE	State NY	Zip Code 10580-1736
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARINE & INDUSTRIAL	Occupation (for Individual) VICE PRESIDENT OF FINANCE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1375.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.402734

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5331 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT OF FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404965
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT OF FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409780
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City RYE State NY Zip Code 10580-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE & INDUSTRIAL Occupation (for Individual) VICE PRESIDENT OF FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.409788
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5332 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 HIGHLAND PARK PLACE

City RYE	State NY	Zip Code 10580-1736
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARINE & INDUSTRIAL	Occupation (for Individual) VICE PRESIDENT OF FINANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.419019

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WRIGHT, DICKERSON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 480369

City FORT LAUDERDALE	State FL	Zip Code 33348-0369
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NV5	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358146

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WRIGHT, EARL, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2708 CASTLE GLEN DR

City CASTLE ROCK	State CO	Zip Code 80108-8302
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMG GUARANTY TRUST	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367901

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5333 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, EDWARD, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5401 WESTBARD AVENUE
 APT 301
 City BETHESDA State MD Zip Code 20816-1486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2016
Transaction ID : SA11A.366057
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WRIGHT, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 S. HULEN ST.
 SUITE 208
 City FORT WORTH State TX Zip Code 76109-1500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER LIFE PLANNING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397630
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WRIGHT, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 S. HULEN ST.
 SUITE 208
 City FORT WORTH State TX Zip Code 76109-1500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER LIFE PLANNING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397635
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5334 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 GLEBE CLOSE
 City RICHMOND State VA Zip Code 23227-3334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.385209
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WRIGHT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 GLEBE CLOSE
 City RICHMOND State VA Zip Code 23227-3334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.388711
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, JACK, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17504 DAWN COURT
 City MEADVILLE State PA Zip Code 16335-3704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.357872
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5335 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, JERRY, MAX, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 W. VETERANS MEMORIAL BLVD
 City HARKER HEIGHTS State TX Zip Code 76548-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) THE BAND ROOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394289
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WRIGHT, JERRY, MAX, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 W. VETERANS MEMORIAL BLVD
 City HARKER HEIGHTS State TX Zip Code 76548-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) THE BAND ROOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394291
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. WRIGHT, JERRY, MAX, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 W. VETERANS MEMORIAL BLVD
 City HARKER HEIGHTS State TX Zip Code 76548-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) THE BAND ROOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402537
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5336 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, JERRY, MAX, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 W. VETERANS MEMORIAL BLVD
 City HARKER HEIGHTS State TX Zip Code 76548-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) THE BAND ROOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.418866
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE. X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348389
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE. X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352304
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5337 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE.
 X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2016
Transaction ID : SA11A.375856
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE.
 X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401462
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE.
 X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414830
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5338 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE.
 X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.414831
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE.
 X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420450
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 SOUTH LAKEWOOD AVE.
 X
 City TULSA State OK Zip Code 74137-4119
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.420452
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5339 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.352167
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357219
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11A.364757
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5340 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.383977
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390679
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.394481
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5341 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399519
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402756
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 RUSTIC DRIVE
 City CASPER State WY Zip Code 82609-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412393
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5342 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, MARY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 ENDICOTT STREET
 302
 City DANVERS State MA Zip Code 01923-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2016
Transaction ID : SA11A.349291
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, MARY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 ENDICOTT STREET
 302
 City DANVERS State MA Zip Code 01923-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2016
Transaction ID : SA11A.366863
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, MARY, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 ENDICOTT STREET
 302
 City DANVERS State MA Zip Code 01923-4817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.370094
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5343 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, MARY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ENDICOTT STREET
302

City DANVERS State MA Zip Code 01923-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11A.384186

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WRIGHT, MARY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ENDICOTT STREET
302

City DANVERS State MA Zip Code 01923-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.386141

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WRIGHT, MARY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ENDICOTT STREET
302

City DANVERS State MA Zip Code 01923-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2016

Transaction ID : SA11A.391733

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5344 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, MARY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ENDICOTT STREET
302

City DANVERS State MA Zip Code 01923-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2016

Transaction ID : SA11A.396634

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. WRIGHT, MARY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ENDICOTT STREET
302

City DANVERS State MA Zip Code 01923-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407549

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. WRIGHT, MARY, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ENDICOTT STREET
302

City DANVERS State MA Zip Code 01923-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2016

Transaction ID : SA11A.415195

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5345 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5275 GRANDVIEW SQUARE LLL
 3213
 City EDINA State MN Zip Code 55436-1693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346656
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. WRIGHT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5275 GRANDVIEW SQUARE LLL
 3213
 City EDINA State MN Zip Code 55436-1693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346663
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. WRIGHT, RICHARD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 FOXMERE DRIVE
 City HENRICO State VA Zip Code 23238-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : SA11A.366262
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5346 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7777 FOREST LANE SUITE C-840
 SUITE C-840
 City DALLAS State TX Zip Code 75230-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL CITIES INC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.397202
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. WROTEN, CYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 RIDGEWOOD ROAD
 City FORT WORTH State TX Zip Code 76107-1076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.377611
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. WRUBLE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 WINTER OAK LANE
 City MEMPHIS State TN Zip Code 38120-2473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GASTRO1 Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 29 / 2016
Transaction ID : SA11A.358130
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5347 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRUBLE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 WINTER OAK LANE
 City MEMPHIS State TN Zip Code 38120-2473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GASTRO1 Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382436
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WRUBLE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 WINTER OAK LANE
 City MEMPHIS State TN Zip Code 38120-2473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GASTRO1 Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416077
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 27 / 2016
Transaction ID : SA11A.382871
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5348 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.382872
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : SA11A.382873
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.391148
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5349 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399277
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399278
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402424
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5350 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRYE, EDRA, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2866 SGODA RD
 City MACON State GA Zip Code 31217-8253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.409878
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WU, KE-CHIH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 JOYNER COURT
 City SAN JOSE State CA Zip Code 95131-2569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANCHOR SEMICONDUCTOR Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.353889
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. WU, KE-CHIH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 JOYNER COURT
 City SAN JOSE State CA Zip Code 95131-2569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANCHOR SEMICONDUCTOR Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2016
Transaction ID : SA11A.380112
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5351 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WU, KE-CHIH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1387 JOYNER COURT
 City SAN JOSE State CA Zip Code 95131-2569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANCHOR SEMICONDUCTOR Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2016
Transaction ID : SA11A.396714
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WULF, JEROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 BUCKSKIN CIRCLE
 City SANTA FE State NM Zip Code 87506-0107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348354
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WULF, JEROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 BUCKSKIN CIRCLE
 City SANTA FE State NM Zip Code 87506-0107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.348356
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5352 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WURTZEL, FREDRIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1770 E ADAMS DRIVE
 City MAITLAND State FL Zip Code 32751-5856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392505
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. WURTZBURGER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 N HIGHLAND STREET, APT 4106
 City MEMPHIS State TN Zip Code 38111-4777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.374091
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WURZER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18430 DOTY AVE.
 City TORRANCE State CA Zip Code 90504-4823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 30 / 2016
Transaction ID : SA11A.359937
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1025.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5353 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WURZER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18430 DOTY AVE.
 City TORRANCE State CA Zip Code 90504-4823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384820
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. WURZER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18430 DOTY AVE.
 City TORRANCE State CA Zip Code 90504-4823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419616
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. WUTHIER, ROY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 714 VINTAGE LANE
 City COLUMBIA State SC Zip Code 29210-5109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11A.353398
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5354 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WUTHIER, ROY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 714 VINTAGE LANE
 City COLUMBIA State SC Zip Code 29210-5109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413606
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. WYATT, CREED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5445 CARUTH HAVEN LN. #1521
 City DALLAS State TX Zip Code 75225-8162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYATT, M.D. CREED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2016
Transaction ID : SA11A.355393
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WYATT, CREED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5445 CARUTH HAVEN LN. #1521
 City DALLAS State TX Zip Code 75225-8162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYATT, M.D. CREED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.370755
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5355 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WYATT, CREED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5445 CARUTH HAVEN LN. #1521
 City DALLAS State TX Zip Code 75225-8162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYATT, M.D. CREED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403227
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WYKES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14176 SEARS RD
 City PLANO State IL Zip Code 60545-9761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 429.00

Date of Receipt 07 / 21 / 2016
Transaction ID : SA11A.352545
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WYKES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14176 SEARS RD
 City PLANO State IL Zip Code 60545-9761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 429.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.396693
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5356 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WYMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 HILLSIDE RD.
 City WESTFIELD State MA Zip Code 01085-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 05 / 2016
Transaction ID : SA11A.362977
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WYMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 HILLSIDE RD.
 City WESTFIELD State MA Zip Code 01085-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : SA11A.368159
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. WYMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 HILLSIDE RD.
 City WESTFIELD State MA Zip Code 01085-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.402228
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5357 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WYMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 218 HILLSIDE RD.

City WESTFIELD	State MA	Zip Code 01085-4108
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.415228

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. WYSOCZYNSKI, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 AUTOMATION DR.

City CARROLLTON	State GA	Zip Code 30117-5257
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIE TECH IND. INC.	Occupation (for Individual) DIE TECH IND. INC.
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2016

Transaction ID : SA11A.413455

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WYSS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8202 N. 53RD STREET

City PARADISE VALLEY	State AZ	Zip Code 85253-2510
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

Transaction ID : SA11A.382541

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5358 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WYSS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8202 N. 53RD STREET
 City PARADISE VALLEY State AZ Zip Code 85253-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382542
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WYSS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8202 N. 53RD STREET
 City PARADISE VALLEY State AZ Zip Code 85253-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 10 / 2016
Transaction ID : SA11A.393741
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WYSS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8202 N. 53RD STREET
 City PARADISE VALLEY State AZ Zip Code 85253-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 10 / 2016
Transaction ID : SA11A.393742
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5359 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WYSS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8202 N. 53RD STREET
 City PARADISE VALLEY State AZ Zip Code 85253-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.411528
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WYSS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8202 N. 53RD STREET
 City PARADISE VALLEY State AZ Zip Code 85253-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413052
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. YADAV, FRIENDRANVIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WOODS LANE
 City ROSLYN State NY Zip Code 11576-3112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CARDIOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368043
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5360 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YADAV, FRIENDRANVIR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 WOODS LANE

City ROSLYN	State NY	Zip Code 11576-3112
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CARDIOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SA11A.368044

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. YADAV, FRIENDRANVIR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 WOODS LANE

City ROSLYN	State NY	Zip Code 11576-3112
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CARDIOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SA11A.370892

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. YAGGY, JUDITH, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2333 TEAKWOOD LANE SW

City ROCHESTER	State MN	Zip Code 55902-1546
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2016

Transaction ID : SA11A.360933

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5361 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YAGGY, JUDITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 TEAKWOOD LANE SW
 City ROCHESTER State MN Zip Code 55902-1546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406973
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. YAKIMOW, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 N KALAMAZOO AVENUE
 City MARSHALL State MI Zip Code 49068-1076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2016
Transaction ID : SA11A.347737
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. YALE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1418 N LAKE SHORE DR
 City CHICAGO State IL Zip Code 60610-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11A.362313
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5362 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. YALE, JUDY, , ,		Date of Receipt MM / DD / YYYY 09 / 22 / 2016
Mailing Address 1418 N LAKE SHORE DR		Transaction ID : SA11A.405985
City CHICAGO	State IL	Zip Code 60610-1631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. YALE, JUDY, , ,		Date of Receipt MM / DD / YYYY 09 / 26 / 2016
Mailing Address 1418 N LAKE SHORE DR		Transaction ID : SA11A.407779
City CHICAGO	State IL	Zip Code 60610-1631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. YAMIN, PAUL, , ,		Date of Receipt MM / DD / YYYY 07 / 27 / 2016
Mailing Address 112 LAUREL VALLEY COURT		Transaction ID : SA11A.356310
City DAYTONA BEACH	State FL	Zip Code 32114-1188
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 208.00	

SUBTOTAL of Receipts This Page (optional).....	202.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5363 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YAMIN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 LAUREL VALLEY COURT
 City DAYTONA BEACH State FL Zip Code 32114-1188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt **08 / 27 / 2016**
Transaction ID : SA11A.383034
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

B. YAMIN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 LAUREL VALLEY COURT
 City DAYTONA BEACH State FL Zip Code 32114-1188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.404398
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. YAMIN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 LAUREL VALLEY COURT
 City DAYTONA BEACH State FL Zip Code 32114-1188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt **09 / 27 / 2016**
Transaction ID : SA11A.411309
 Amount of Each Receipt this Period 27.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 154.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5364 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YARBROUGH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 WINDSOR LANE
 City KAYSVILLE State UT Zip Code 84037-1390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11A.379403
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. YARBROUGH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 WINDSOR LANE
 City KAYSVILLE State UT Zip Code 84037-1390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.417553
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. YATES, BOB, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 VIA HAVRE
 City NEWPORT BEACH State CA Zip Code 92663-4905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386271
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5365 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YATES, BOB, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 VIA HAVRE

City NEWPORT BEACH	State CA	Zip Code 92663-4905
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386284

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. YATES, BOB, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 VIA HAVRE

City NEWPORT BEACH	State CA	Zip Code 92663-4905
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398924

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. YATES, BOB, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 VIA HAVRE

City NEWPORT BEACH	State CA	Zip Code 92663-4905
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398927

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5366 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YATES, BOB, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 128 VIA HAVRE

City NEWPORT BEACH	State CA	Zip Code 92663-4905
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : SA11A.398928

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. YATES, BOB, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 128 VIA HAVRE

City NEWPORT BEACH	State CA	Zip Code 92663-4905
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414253

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. YATES, BOB, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 128 VIA HAVRE

City NEWPORT BEACH	State CA	Zip Code 92663-4905
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.414258

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5367 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YATES, LINDA, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 LEISURE COURT

City WYOMISSING	State PA	Zip Code 19610-1969
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLINO CAPITAL MANAGEMENT	Occupation (for Individual) CLIENT ADVISOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11A.358331

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

B. YATES, LINDA, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 LEISURE COURT

City WYOMISSING	State PA	Zip Code 19610-1969
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLINO CAPITAL MANAGEMENT	Occupation (for Individual) CLIENT ADVISOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382426

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. YATES, LINDA, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 149 LEISURE COURT

City WYOMISSING	State PA	Zip Code 19610-1969
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CARLINO CAPITAL MANAGEMENT	Occupation (for Individual) CLIENT ADVISOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : SA11A.416126

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5368 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YAVITZ, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12375 LEGEND LAKES DRIVE
 City ROSCOE State IL Zip Code 61073-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : SA11A.379806
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. YAVITZ, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12375 LEGEND LAKES DRIVE
 City ROSCOE State IL Zip Code 61073-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2016
Transaction ID : SA11A.400066
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. YAVITZ, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12375 LEGEND LAKES DRIVE
 City ROSCOE State IL Zip Code 61073-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412944
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5369 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YAVITZ, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12375 LEGEND LAKES DRIVE
 City ROSCOE State IL Zip Code 61073-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412945
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. YEAGER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 EAST NICKLAUS AVE.
 City KALISPELL State MT Zip Code 59901-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11A.354487
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. YEAGER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 EAST NICKLAUS AVE.
 City KALISPELL State MT Zip Code 59901-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2016
Transaction ID : SA11A.368127
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5370 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YEAGER, ANTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 186 EAST NICKLAUS AVE.

City KALISPELL	State MT	Zip Code 59901-2783
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374167

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. YEAGER, ANTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 186 EAST NICKLAUS AVE.

City KALISPELL	State MT	Zip Code 59901-2783
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : SA11A.374169

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. YEAGER, ANTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 186 EAST NICKLAUS AVE.

City KALISPELL	State MT	Zip Code 59901-2783
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SA11A.379990

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5371 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YEAGER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 EAST NICKLAUS AVE.
 City KALISPELL State MT Zip Code 59901-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.398770
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YEAGER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 EAST NICKLAUS AVE.
 City KALISPELL State MT Zip Code 59901-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404711
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YEAGER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 EAST NICKLAUS AVE.
 City KALISPELL State MT Zip Code 59901-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.404713
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5372 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YEAGER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 EAST NICKLAUS AVE.
 City KALISPELL State MT Zip Code 59901-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 25 / 2016
Transaction ID : SA11A.408711
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YEAGER, ANTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 EAST NICKLAUS AVE.
 City KALISPELL State MT Zip Code 59901-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.409397
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YIN, WINNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 HORSESHOE DRIVE
 City BLUE BELL State PA Zip Code 19422-1856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERCK & CO., INC. Occupation (for Individual) SCIENTIST
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403966
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5373 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. YIN, WINNIE, , ,

Mailing Address **1310 HORSESHOE DRIVE**

City **BLUE BELL** State **PA** Zip Code **19422-1856**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **MERCK & CO., INC.** Occupation (for Individual) **SCIENTIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **09 / 22 / 2016**
Transaction ID : SA11A.403977

Amount of Each Receipt this Period **100.00**

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. YIP, CHING, , ,

Mailing Address **6934 LONGFELLOW COURT**

City **SAN JOSE** State **CA** Zip Code **95129-3766**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KAISER FOUNDATION HOSPITAL** Occupation (for Individual) **PHARMACIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 16 / 2016**
Transaction ID : SA11A.370662

Amount of Each Receipt this Period **25.00**

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. YIP, CHING, , ,

Mailing Address **6934 LONGFELLOW COURT**

City **SAN JOSE** State **CA** Zip Code **95129-3766**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **KAISER FOUNDATION HOSPITAL** Occupation (for Individual) **PHARMACIST**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **09 / 07 / 2016**
Transaction ID : SA11A.391064

Amount of Each Receipt this Period **15.00**

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **140.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5374 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YIP, CHING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6934 LONGFELLOW COURT
 City SAN JOSE State CA Zip Code 95129-3766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER FOUNDATION HOSPITAL Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : SA11A.391065
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. YIP, CHING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6934 LONGFELLOW COURT
 City SAN JOSE State CA Zip Code 95129-3766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER FOUNDATION HOSPITAL Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405550
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. YIP, CHING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6934 LONGFELLOW COURT
 City SAN JOSE State CA Zip Code 95129-3766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER FOUNDATION HOSPITAL Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 09 / 22 / 2016
Transaction ID : SA11A.405552
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5375 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2016
Transaction ID : SA11A.345891
 Amount of Each Receipt this Period 5.00
 Memo Item
 CONTRIBUTION

B. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2016
Transaction ID : SA11A.346598
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2016
Transaction ID : SA11A.347342
 Amount of Each Receipt this Period 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 20.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5376 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Transaction ID : SA11A.347344

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

Transaction ID : SA11A.348287

Amount of Each Receipt this Period
11.00

Memo Item
CONTRIBUTION

C. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Transaction ID : SA11A.352386

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	46.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5377 OF 5722
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372945

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

B. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2016

Transaction ID : SA11A.372949

Amount of Each Receipt this Period
10.00

Memo Item
CONTRIBUTION

C. YOON, CHIJA, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 PAINTED MOUNTAIN DR

City LAS VEGAS	State NV	Zip Code 89148-2724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCLV	Occupation (for Individual) CHRISTIAN WORKER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
231.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2016

Transaction ID : SA11A.375934

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5378 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11A.401527
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION

B. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403278
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

C. YOON, CHIJA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 PAINTED MOUNTAIN DR
 City LAS VEGAS State NV Zip Code 89148-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CCLV Occupation (for Individual) CHRISTIAN WORKER
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403284
 Amount of Each Receipt this Period 10.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5379 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YORK, DOUGLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6316 KEIM DRIVE

City PARADISE VALLEY	State AZ	Zip Code 85253-4275
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EWING IRRIGATION	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 22 / 2016

Transaction ID : SA11A.352932

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. YORK, RAYMON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23005 N 74TH STREET UNIT 1213

City SCOTTSDALE	State AZ	Zip Code 85255-7506
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EWINE IRRIGATION	Occupation (for Individual) MGR
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.360912

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. YORK, RAYMON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23005 N 74TH STREET UNIT 1213

City SCOTTSDALE	State AZ	Zip Code 85255-7506
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EWINE IRRIGATION	Occupation (for Individual) MGR
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
09 / 12 / 2016

Transaction ID : SA11A.392841

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5380 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. YOST, JOHN, , ,

Mailing Address **1601 WEST 9TH ST**
B

City AUSTIN	State TX	Zip Code 78703-4709
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 29 / 2016

Transaction ID : SA11A.381754

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. YOST, JOHN, , ,

Mailing Address **1601 WEST 9TH ST**
B

City AUSTIN	State TX	Zip Code 78703-4709
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 31 / 2016

Transaction ID : SA11A.386707

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. YOUNG, BEVERLY, , ,

Mailing Address **10 CEDAR POINT DRIVE**

City SAVANNAH	State GA	Zip Code 31405-1021
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
431.00

Date of Receipt
07 / 18 / 2016

Transaction ID : SA11A.348804

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5381 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357376
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357377
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. YOUNG, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22440 HOGEYE RD
 City MANOR State TX Zip Code 78653-5202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTH HOUSTON POLE LINE Occupation (for Individual) SUPERINTENDANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2016
Transaction ID : SA11A.408734
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5382 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, FRED, M., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3201 MICHIGAN BOULEVARD
 City RACINE State WI Zip Code 53402-3819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385215
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. YOUNG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 RIDGEWAY ST.
 City ARDMORE State OK Zip Code 73401-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.373390
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. YOUNG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 RIDGEWAY ST.
 City ARDMORE State OK Zip Code 73401-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384170
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	51200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5383 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2207 RIDGEWAY ST.
 City ARDMORE State OK Zip Code 73401-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384179
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. YOUNG, JAMES, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N. CORPORATE DRIVE - SUITE 100 SUITE 100
 City BROOKFIELD State WI Zip Code 53045-5800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390268
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. YOUNG, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1523 S DOLLISON AVENUE
 City SPRINGFIELD State MO Zip Code 65807-1800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.406865
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5384 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3906 PLEASANT VALKEY DRIVE
 City MISSOURI CITY State TX Zip Code 77459-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 08 / 20 / 2016
Transaction ID : SA11A.376009
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. YOUNG, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3906 PLEASANT VALKEY DRIVE
 City MISSOURI CITY State TX Zip Code 77459-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 20 / 2016
Transaction ID : SA11A.400823
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. YOUNGER, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 HOLLOWAY BLVD
 City BROWNSBURG State IN Zip Code 46112-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROS CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 07 / 20 / 2016
Transaction ID : SA11A.350474
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5385 OF 5722
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNGER, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 HOLLOWAY BLVD
 City BROWNSBURG State IN Zip Code 46112-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROS CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.368597
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. YOUNGER, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 HOLLOWAY BLVD
 City BROWNSBURG State IN Zip Code 46112-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROS CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390712
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. YOUNGER, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 HOLLOWAY BLVD
 City BROWNSBURG State IN Zip Code 46112-8356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROS CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416057
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5386 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, LINDA, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2040 CEDAR POINT LN

City CUMMING	State GA	Zip Code 30041-7255
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORSYTH COUNTY BOE	Occupation (for Individual) EDUC PARAPROFESSIONAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2016

Transaction ID : SA11A.350606

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. YOUNG, LINDA, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2040 CEDAR POINT LN

City CUMMING	State GA	Zip Code 30041-7255
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORSYTH COUNTY BOE	Occupation (for Individual) EDUC PARAPROFESSIONAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2016

Transaction ID : SA11A.355224

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. YOUNG, LINDA, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2040 CEDAR POINT LN

City CUMMING	State GA	Zip Code 30041-7255
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORSYTH COUNTY BOE	Occupation (for Individual) EDUC PARAPROFESSIONAL
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.394006

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5387 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, LINDA, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2040 CEDAR POINT LN

City CUMMING	State GA	Zip Code 30041-7255
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORSYTH COUNTY BOE	Occupation (for Individual) EDUC PARAPROFESSIONAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2016

Transaction ID : SA11A.411410

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. YOUNGMAN, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5350 CALLE REAL APT 1C

City SANTA BARBARA	State CA	Zip Code 93111-1698
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Transaction ID : SA11A.388913

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. YOUNG, NORMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2114 YOSEMITE DR.

City LEBANON	State IN	Zip Code 46052-3146
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.386531

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5388 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390689
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402947
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.402948
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5389 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412855
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412858
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. YOUNG, NORMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2114 YOSEMITE DR.
 City LEBANON State IN Zip Code 46052-3146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.412880
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5390 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7608 AVENIDA VALEDOR
 City BAKERSFIELD State CA Zip Code 93309-0807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357282
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. YOUNG, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1423 TRAVIS CIRCLE NORTH
 City IRVING State TX Zip Code 75038-6238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.412505
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. YOUNG, ROGER, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 775816
 City STEAMBOAT SPRINGS State CO Zip Code 80477-5816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : SA11A.395876
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5391 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNGER, TED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1984 LIN ROAD
 City LYNCHBURG State VA Zip Code 24503-3052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.392651
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 02 / 2016
Transaction ID : SA11A.360096
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384520
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5392 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2016
Transaction ID : SA11A.384527
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.403489
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. YOUNG, THOMAS, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8967 BLOOMFIELD BLVD
 City SARASOTA State FL Zip Code 34238-4452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2016
Transaction ID : SA11A.411026
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5393 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNIS, ANTOINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 MEMORIAL CIRCLE
 City HOUSTON State TX Zip Code 77024-7512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANTOINE YOUNIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 27 / 2016
Transaction ID : SA11A.410409
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. YOUNIS, ANTOINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 MEMORIAL CIRCLE
 City HOUSTON State TX Zip Code 77024-7512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANTOINE YOUNIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.411981
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. YOUNIS, ANTOINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11403 MEMORIAL CIRCLE
 City HOUSTON State TX Zip Code 77024-7512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANTOINE YOUNIS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.411983
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5394 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YSNTZER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 REMONT CIRCLE
 City OAK PARK State CA Zip Code 91377-4739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.411161
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 28 / 2016
Transaction ID : SA11A.357628
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 13 / 2016
Transaction ID : SA11A.366874
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5395 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372293
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 28 / 2016
Transaction ID : SA11A.382762
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384707
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5396 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.394556
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397754
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399265
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5397 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.403505
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407629
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413108
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5398 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YSURSA, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2846 S. TRAILWOOD WAY
 City BOISE State ID Zip Code 83716-5742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENEVIEVE YSURSA Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.414882
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. YUNDT, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11494 GLOWING SUNSET LANE
 City LAS VEGAS State NV Zip Code 89135-1674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392529
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. YURTCHUK, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 S WOODSIDE LN
 City WILLIAMSVILLE State NY Zip Code 14221-5950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALSPAN CORP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385237
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 2525.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5399 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZACHA, CHARLES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 DECKER CANYON ROAD
 City MALIBU State CA Zip Code 90265-2320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2016
Transaction ID : SA11A.373376
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ZACHA, CHARLES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 DECKER CANYON ROAD
 City MALIBU State CA Zip Code 90265-2320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390560
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ZACHA, CHARLES, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 DECKER CANYON ROAD
 City MALIBU State CA Zip Code 90265-2320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407719
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5400 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ZACHARIASEN, MOREEN, , ,

Mailing Address **21 TIMBER LANE**

City **AVON** State **CT** Zip Code **06001-2315**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **204.00**

Date of Receipt **08 / 24 / 2016**
Transaction ID : SA11A.377641

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ZAGROBELNY, JAMES, , ,

Mailing Address **4504 LEAF COURT**

City **RALEIGH** State **NC** Zip Code **27612-3910**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **CRISPIN CORPORATION** Occupation (for Individual) **ENGINEER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.386463

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ZAHARIE, ROBERT, , ,

Mailing Address **PO BOX 3369**

City **COEUR D ALENE** State **ID** Zip Code **83816-2527**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **ALPHA SERVICES** Occupation (for Individual) **GM**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **08 / 29 / 2016**
Transaction ID : SA11A.385076

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **400.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5401 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAHARIE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3369
 City COEUR D ALENE State ID Zip Code 83816-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALPHA SERVICES Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11A.416136
 Amount of Each Receipt this Period
 100.00
 Memo Item
CONTRIBUTION

B. ZAK, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 VERDE DRIVE
 City SCHAUMBURG State IL Zip Code 60173-6533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016
Transaction ID : SA11A.391329
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION

C. ZALAR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 QUEENSCLIFF CT
 City PURCELLVILLE State VA Zip Code 20132-3483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : SA11A.376261
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5402 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZALAR, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 QUEENSCLIFF CT
 City PURCELLVILLE State VA Zip Code 20132-3483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.376263
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ZAMRZLA, JOHNNY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 EAST AVENUE Q
 City PALMDALE State CA Zip Code 93550-4140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERN PACIFIC Occupation (for Individual) ROOFING & SHEETMETAL CONTRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2016
Transaction ID : SA11A.392097
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ZANDER, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1383 POPLAR POINTE, SE
 City SMYRNA State GA Zip Code 30082-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RISK MANAAGEMENT PROVIDERS, INC. Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2016
Transaction ID : SA11A.348765
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5403 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZANDER, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1383 POPLAR POINTE, SE
 City SMYRNA State GA Zip Code 30082-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RISK MANAAGEMENT PROVIDERS, INC. INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384412
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. ZANDER, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1383 POPLAR POINTE, SE
 City SMYRNA State GA Zip Code 30082-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RISK MANAAGEMENT PROVIDERS, INC. INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.398094
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ZANNINI, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2457 MILLBROOK DR
 City HAW RIVER State NC Zip Code 27258-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414005
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5404 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZANNINI, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2457 MILLBROOK DR
 City HAW RIVER State NC Zip Code 27258-9524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.414007
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. ZAPPACOSTA, PIERLUIGI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 FAXON RD
 City ATHERTON State CA Zip Code 94027-4046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402318
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. ZAPPACOSTA, PIERLUIGI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 98 FAXON RD
 City ATHERTON State CA Zip Code 94027-4046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.402320
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5405 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZAR, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 MANHATTAN BEACH BLVD.
 SUITE 220
 City MANHATTAN BEACH State CA Zip Code 90266-5130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372652
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZAR, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 MANHATTAN BEACH BLVD.
 SUITE 220
 City MANHATTAN BEACH State CA Zip Code 90266-5130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372671
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ZAR, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 MANHATTAN BEACH BLVD.
 SUITE 220
 City MANHATTAN BEACH State CA Zip Code 90266-5130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 18 / 2016
Transaction ID : SA11A.399905
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5406 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ZARETZKA, JUDITH, , ,

Mailing Address **529 STARLIGHT LN**

City ARROYO GRANDE	State CA	Zip Code 93420-4157
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 12 / 2016

Transaction ID : SA11A.346937

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ZARETZKA, JUDITH, , ,

Mailing Address **529 STARLIGHT LN**

City ARROYO GRANDE	State CA	Zip Code 93420-4157
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 12 / 2016

Transaction ID : SA11A.365762

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ZARETZKA, JUDITH, , ,

Mailing Address **529 STARLIGHT LN**

City ARROYO GRANDE	State CA	Zip Code 93420-4157
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 12 / 2016

Transaction ID : SA11A.393644

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5407 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZARRELLA, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1399 EAST AVE
 City ROCHESTER State NY Zip Code 14610-1609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.419755
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ZBIHLEY, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2513 MINTON DRIVE
 City MOON TOWNSHIP State PA Zip Code 15108-9207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONDEMAND ENERGY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.365095
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ZBIHLEY, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2513 MINTON DRIVE
 City MOON TOWNSHIP State PA Zip Code 15108-9207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONDEMAND ENERGY Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 25 / 2016
Transaction ID : SA11A.378452
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5408 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZBIHLEY, JOHN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2513 MINTON DRIVE

City MOON TOWNSHIP	State PA	Zip Code 15108-9207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONDEMAND ENERGY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2016

Transaction ID : SA11A.382406

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ZBIHLEY, JOHN, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2513 MINTON DRIVE

City MOON TOWNSHIP	State PA	Zip Code 15108-9207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONDEMAND ENERGY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2016

Transaction ID : SA11A.393709

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ZEEK, ROBERT, W., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 25

City SOUTH BELOIT	State IL	Zip Code 61080-0025
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLACKHAWK PROPANE	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2016

Transaction ID : SA11A.353011

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5409 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ZEIGLER, JUNE, , ,			Date of Receipt
Mailing Address 739 E 2ND ST. N APT 142			<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2016"/>
City MORRISTOWN	State TN	Zip Code 37814-	Transaction ID : SA11A.350318
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="825.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ZEIGLER, JUNE, , ,			Date of Receipt
Mailing Address 739 E 2ND ST. N APT 142			<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2016"/>
City MORRISTOWN	State TN	Zip Code 37814-	Transaction ID : SA11A.353399
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="825.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ZEIGLER, JUNE, , ,			Date of Receipt
Mailing Address 739 E 2ND ST. N APT 142			<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City MORRISTOWN	State TN	Zip Code 37814-	Transaction ID : SA11A.386451
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="825.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5410 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEIGLER, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 739 E 2ND ST. N
APT 142

City MORRISTOWN State TN Zip Code 37814-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11A.402242

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. ZEIGLER, JUNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 739 E 2ND ST. N
APT 142

City MORRISTOWN State TN Zip Code 37814-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.422002

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ZENCZAK, GREGORY, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7342 CROSSWINDS LANE

City BRECKSVILLE State OH Zip Code 44141-2777

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ORTTECH Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.355859

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5411 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZHOU, QUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 LYMAN ROAD
 City CHESTNUT HILL State MA Zip Code 02467-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IDG Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.370609
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

B. ZIEGLER, MARGARET, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 SCHLOENMER DR.
 City WEST BEND State WI Zip Code 53095-5507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 544.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.356309
 Amount of Each Receipt this Period 247.00
 Memo Item CONTRIBUTION

C. ZIEGLER, MARGARET, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 SCHLOENMER DR.
 City WEST BEND State WI Zip Code 53095-5507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 544.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.410636
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 15297.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5412 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIEGLER, THAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 8298

City SAN ANTONIO	State TX	Zip Code 78208-0298
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2016

Transaction ID : SA11A.364410

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. ZIEGLER, THAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 8298

City SAN ANTONIO	State TX	Zip Code 78208-0298
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11A.381162

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. ZIEGLER, THAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 8298

City SAN ANTONIO	State TX	Zip Code 78208-0298
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11A.417422

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5413 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIELINSKI, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 PENNSYLVANIA AVENUE
 City ONTONAGON State MI Zip Code 49953-1314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2016
Transaction ID : SA11A.398834
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. ZIELINSKI, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 PENNSYLVANIA AVENUE
 City ONTONAGON State MI Zip Code 49953-1314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417698
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. ZIELINSKI, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 PENNSYLVANIA AVENUE
 City ONTONAGON State MI Zip Code 49953-1314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.417699
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5414 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIETLOW, DONALD, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1625
 City LA CROSSE State WI Zip Code 54602-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KWIK TRIP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.391364
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. ZIKA, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7145 SW SHARON LN
 City PORTLAND State OR Zip Code 97225-2054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMPTON AFFILIATES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367937
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. ZIMBALIST, EFREM, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 JASMINE DR.
 City DELRAY BEACH State FL Zip Code 33483-4794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTIVE INTEREST MEDIA Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374139
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5415 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMBALIST, EFREM, , MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 JASMINE DR.
 City DELRAY BEACH State FL Zip Code 33483-4794
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACTIVE INTEREST MEDIA Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.399551
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ZIMMERN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170,RIVER ROAD
 City SHELTON State CT Zip Code 06484-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016
Transaction ID : SA11A.374892
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 07 / 06 / 2016
Transaction ID : SA11A.345911
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5416 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2016
Transaction ID : SA11A.350455
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

B. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2016
Transaction ID : SA11A.357694
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

C. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : SA11A.375101
 Amount of Each Receipt this Period
 50.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5417 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382113
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.382114
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZIMMERMAN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MANGROVE COURT WEST
 City HOMOSASSA State FL Zip Code 34446-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCL CONSTRUCTION Occupation (for Individual) SAFETY ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.390607
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5418 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMMERMAN, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7 MANGROVE COURT WEST**

City HOMOSASSA	State FL	Zip Code 34446-4513
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PCL CONSTRUCTION	Occupation (for Individual) SAFETY ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **485.00**

Date of Receipt
09 / 22 / 2016

Transaction ID : SA11A.404011

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. ZIMMERMAN, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7 MANGROVE COURT WEST**

City HOMOSASSA	State FL	Zip Code 34446-4513
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PCL CONSTRUCTION	Occupation (for Individual) SAFETY ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **485.00**

Date of Receipt
09 / 27 / 2016

Transaction ID : SA11A.410083

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. ZIMMERMAN, SARAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **427 COOK ROAD**

City ELON	State NC	Zip Code 27244-9355
---------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
09 / 24 / 2016

Transaction ID : SA11A.408849

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5419 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMMERMAN, SARAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 427 COOK ROAD

City ELON	State NC	Zip Code 27244-9355
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.417627

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. ZIMMERMAN, SARAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 427 COOK ROAD

City ELON	State NC	Zip Code 27244-9355
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11A.418514

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. ZIMMERMAN, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46 MINNEHAHA CIRCLE

City MAITLAND	State FL	Zip Code 32751-4539
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Transaction ID : SA11A.378774

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5420 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMMERMAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 MINNEHAHA CIRCLE
 City MAITLAND State FL Zip Code 32751-4539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384586
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ZIMMERMAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 MINNEHAHA CIRCLE
 City MAITLAND State FL Zip Code 32751-4539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.384615
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ZIMMERMAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 MINNEHAHA CIRCLE
 City MAITLAND State FL Zip Code 32751-4539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.397601
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

750.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5421 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIMMERMAN, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 MINNEHAHA CIRCLE
 City MAITLAND State FL Zip Code 32751-4539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.416073
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. ZINGER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 PONDSIDE DRIVE
 City BOLTON State MA Zip Code 01740-1275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2016
Transaction ID : SA11A.362403
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ZINGER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 PONDSIDE DRIVE
 City BOLTON State MA Zip Code 01740-1275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372634
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5422 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZINGER, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 PONDSIDE DRIVE
 City BOLTON State MA Zip Code 01740-1275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.372640
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZINKE, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 ARMOND LANE
 City SILVER SPRING State MD Zip Code 20905-3925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.419900
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ZINMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 MIDLAND AVENUE
 City TARRYTOWN State NY Zip Code 10591-4317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.389482
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5423 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZINNEN, DARLENE, W., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3991 GULF SHORE BOULEVARD N
 APT 703
 City NAPLES State FL Zip Code 34103-3693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : SA11A.376548
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

B. ZION, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 ISLAND BLVD PH5
 PH5
 City AVENTURA State FL Zip Code 33160-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11A.362962
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. ZION, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 ISLAND BLVD PH5
 PH5
 City AVENTURA State FL Zip Code 33160-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2016
Transaction ID : SA11A.366733
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5424 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZION, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 ISLAND BLVD PH5
 PH5
 City AVENTURA State FL Zip Code 33160-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11A.390707
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. ZION, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 ISLAND BLVD PH5
 PH5
 City AVENTURA State FL Zip Code 33160-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016
Transaction ID : SA11A.399509
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ZION, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 ISLAND BLVD PH5
 PH5
 City AVENTURA State FL Zip Code 33160-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2016
Transaction ID : SA11A.413474
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5425 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZIPKIN, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2690 SECTION ROAD
 City CINCINNATI State OH Zip Code 45237-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.345209
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ZIPKIN, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2690 SECTION ROAD
 City CINCINNATI State OH Zip Code 45237-3712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.396112
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ZISKOVSKY, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 S BROADWAY STREET
 City TOLEDO State IA Zip Code 52342-1311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.369458
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5426 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZITTEL, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 NEW GATE LOOP
 City LAKE MARY State FL Zip Code 32746-4126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JEWETT ORTHOPEDIC CLINIC, P.A. Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 12 / 2016**
Transaction ID : SA11A.392805
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ZIZZA, SALVATORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GRACIE SQUARE
 City NEW YORK State NY Zip Code 10028-8001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERGENCOVE REALTY INC Occupation (for Individual) RE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 06 / 2016**
Transaction ID : SA11A.346056
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ZOFFER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 MEADOW RUN DRIVE
 City CHAPEL HILL State NC Zip Code 27517-7786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 30 / 2016**
Transaction ID : SA11A.383813
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1525.00
TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5427 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZOFFER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 MEADOW RUN DRIVE
 City CHAPEL HILL State NC Zip Code 27517-7786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383843
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ZOFFER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 MEADOW RUN DRIVE
 City CHAPEL HILL State NC Zip Code 27517-7786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383844
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZOFFER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 MEADOW RUN DRIVE
 City CHAPEL HILL State NC Zip Code 27517-7786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2016
Transaction ID : SA11A.383856
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5428 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZOLDAN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 N LAKE SHORE DR.
 1812
 City CHICAGO State IL Zip Code 60611-5061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 605.00

Date of Receipt
 08 / 27 / 2016
Transaction ID : SA11A.382925
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. ZOLDAN, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 N LAKE SHORE DR.
 1812
 City CHICAGO State IL Zip Code 60611-5061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 605.00

Date of Receipt
 08 / 27 / 2016
Transaction ID : SA11A.382926
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ZONNENBERG, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 LAKESHORE DRIVE
 City MOUNT DORA State FL Zip Code 32757-5415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : SA11A.413532
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5429 OF 5722
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZONNENBERG, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 LAKESHORE DRIVE
 City MOUNT DORA State FL Zip Code 32757-5415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.413534
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZORGER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 ANNIE COURT
 City NORMAN State OK Zip Code 73069-4236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.354117
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. ZUBER, PEGGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 AVENIDA SEVILLA UNIT O
 City LAGUNA WOODS State CA Zip Code 92637-4521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.386333
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5430 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZUCH, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 ST. JOHNS DRIVE
 City DALLAS State TX Zip Code 75205-2906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERNST & YOUNG Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11A.419685
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. ZUCK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8200 N. SPRING RUN RD.
 City MIDLOTHIAN State VA Zip Code 23112-1622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : SA11A.353961
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ZWINGELBERG, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 S COVE TERRACE DRIVE
 City PANAMA CITY State FL Zip Code 32401-4038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016
Transaction ID : SA11A.401623
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5431 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZYCK, THOMAS, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11539 BURR OAK LANE
 City BURR RIDGE State IL Zip Code 60527-8010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2016
Transaction ID : SA11A.381036
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ZYCK, THOMAS, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11539 BURR OAK LANE
 City BURR RIDGE State IL Zip Code 60527-8010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.406736
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. AMBLING PARTNERS, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 348 ENTERPRISE DR
 City VALDOSTA State GA Zip Code 31601-5169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.400504
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5432 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GODWIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 348 ENTERPRISE DR.
 City VALDOSTA State GA Zip Code 31601-5169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMBLING COMPANIES, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 21 / 2016**
Transaction ID : SA11A.407201
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. AMERICAN TRANSMISSION COMPANY CONDUIT
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 47
 City WAUKESHA State WI Zip Code 53187-0047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385408
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW

C. HOFBAUER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W298N404 KINGS WAY
 City WAUKESHA State WI Zip Code 53188-9350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN TRANSMISSION COMPANY Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11A.385409
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION
 EARMARKED FROM AMERICAN TRANSMISSION COMPANY CONDUIT

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5433 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSAN, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1280 CLUB CIR 5

City BROOKFIELD	State WI	Zip Code 53005-6976
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATC	Occupation (for Individual) EXEXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385410

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

EARMARKED FROM AMERICAN TRANSMISSION COMPANY CONDUIT

B. ROWE, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N34W23712 FIVE FIELDS ROAD
APT. 203

City PEWAUKEE	State WI	Zip Code 53072-5785
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN TRANSMISSION COMPANY	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385411

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

EARMARKED FROM AMERICAN TRANSMISSION COMPANY CONDUIT

C. ARIEL COHEN AND ASSOC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14400 PARKVALE RD

City ROCKVILLE	State MD	Zip Code 20853-2439
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11A.396552

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5434 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COHEN, ARIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14400 PARKVALE RD

City ROCKVILLE	State MD	Zip Code 20853-2439
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARIEL COHEN & ASSOCIATES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11A.424321

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. BALLARD SPAHR LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1735 MARKET STREET 51ST FL

City PHILADELPHIA	State PA	Zip Code 19103-7507
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.347101

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

C. JARIN, KENNETH, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1735 MARKET ST 51ST FL

City PHILADELPHIA	State PA	Zip Code 19103-7507
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BALLARD SPAHR LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.379199

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5435 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BENNETT FINANCIAL GROUP

Mailing Address 518 PROSPECT AVE

City LITTLE SILVER	State NJ	Zip Code 07739-1454
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.347099

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BENNETT, JUSTIN, , ,

Mailing Address 518 PROSPECT AVE

City LITTLE SILVER	State NJ	Zip Code 07739-1454
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BENNETT FINANCIAL GROUP LLC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.375555

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COURSON FAMILY OIL & GAS PARTNERSHIP LTD

Mailing Address PO BOX 809

City PERRYTON	State TX	Zip Code 79070-0809
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11A.360308

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

REFUNDED \$2,500.00 ON 09/27/2016

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5436 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. FOREST COUNTY POTAWATOMI COMMUNITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 340

City CRANDON	State WI	Zip Code 54520-0340
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11A.395807

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. GIUSTINA RESOURCES, LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 529

City EUGENE	State OR	Zip Code 97440-0529
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.367910

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

C. GIUSTINA, DAN, , MR.,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 529

City EUGENE	State OR	Zip Code 97440-0529
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
GIUSTINA RESOURCES MEMBER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.385519

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5437 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARMONY CAPITAL INVESTMENTS LP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6363 7TH AVE S STE 210

City SEATTLE	State WA	Zip Code 98108-3407
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.367914

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

B. PLATT, JAY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6363 7TH AVE S STE 210

City SEATTLE	State WA	Zip Code 98108-3407
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HARMONY CAPITAL INVESTMENTS	Occupation (for Individual) MEMBER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SA11A.393900

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. HILLTOWN CROSSING LP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 W GERMANTOWN PIKE STE 120

City PLYMOUTH MEETING	State PA	Zip Code 19462-1420
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.347100

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5438 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLFSON, KAREN, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 W GERMANTOWN PIKE

City PLYMOUTH MEETING	State PA	Zip Code 19462-1420
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HILLTOWN CROSSING LP	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12.50

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.354984

Amount of Each Receipt this Period
12.50

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. WOLFSON, STEVEN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 W GERMANTOWN PIKE

City PLYMOUTH MEETING	State PA	Zip Code 19462-1420
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HILLTOWN CROSSING LP	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2487.50

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11A.354983

Amount of Each Receipt this Period
2487.50

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. HODGSON RUSS LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 PEARL ST #100

City BUFFALO	State NY	Zip Code 14202-4014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11A.385403

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5439 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOEKSTRA GLOBAL STRATEGIES, LTD.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 CENTRAL AVE STE 220

City HOLLAND	State MI	Zip Code 49423-2831
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.367913

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

REFUNDED \$2,500.00 ON 09/23/2016

B. HUNTON & WILLIAMS LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.354985

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

C. AHMAD, SYED, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371672

Amount of Each Receipt this Period
11.58

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5440 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALBERS, MICHAEL, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371673

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. ALCOTT, KENNETH, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371674

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. AUSTIN, L., S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371675

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5441 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEARDSWORTH, JOHN, J., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371676
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BECKER, RYAN, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371677
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BECKER, STEVEN, H.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371678
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5442 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERES, MELINDA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371679
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BIERBOWER, MARK, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371680
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BLAIR, JEFFRY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371681
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5443 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLANCHARD, ANDREW, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371682
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BOSHER, MATTHEW, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371683
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BOWEN, JAMES, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371684
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5444 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRANDLEY, DAVID, F., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371685

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. BROOME, SHANNON, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371686

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. BROWDER, BENJAMIN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371687

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5445 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BROWN, ANTHONY, T., , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371688

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. BROWNELL, F, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371690

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. BROWN, TYLER, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371689

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5446 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. BULLEIT, KRISTY, N.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371691
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. BUONANNO, JOSEPH, B.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371692
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. BURNS, M, B.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371693
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5447 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURTON, PATRICK, S.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt
07 / 27 / 2016
Transaction ID : SA11A.371694

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. CALVERT, MATTHEW, J.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt
07 / 27 / 2016
Transaction ID : SA11A.371695

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. CAMPBELL, DANIEL, M.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt
07 / 27 / 2016
Transaction ID : SA11A.371696

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5448 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANTRILL, THOMAS, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371697
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. CARLSON, CURTIS, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371698
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. CHENAULT, JOHN, C., , V
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371699
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5449 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CLEMENT, WHITTINGTON, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371700
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. COLLINS, CASSANDRA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371701
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. CUMMINGS, ASHLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371702
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5450 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CUNNINGHAM, ALEXANDRA, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.371703
 Amount of Each Receipt this Period
 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. DANON, SAMUEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.371704
 Amount of Each Receipt this Period
 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. DELIONADO, JOHN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.371705
 Amount of Each Receipt this Period
 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5451 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMM, STEPHEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371706
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. DORSEY, DEE ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371707
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. DOUMA, EDWARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371708
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5452 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOYLE, COLLEEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371709
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. DUCHARME, SEAN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371710
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. DUNCAN, DEIDRE, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371711
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5453 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. EAMES, FREDERICK, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371712
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. EASTEP, HEATHER, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371713
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. EDWARDS, W, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371714
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5454 OF 5722		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EICHMAN, JOHN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371715
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. ELGIE, TARA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371716
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. EMORY, FRANK, E., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371717
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 0.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5455 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ENJAMIO, JUAN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371718
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. ESKENAZI, PHILLIP, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371719
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. FAGLIONI, KELLY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371720
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5456 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FAILLA, SUSAN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371721

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. FEILER, ERIC, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

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07		27		2016

Transaction ID : SA11A.371722

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. FERGUSON, LINDSAY, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371723

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5457 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FERNANDES, EDWARD, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371724
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. FICHTHORN, NORMAN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371725
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. FIELD, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371726
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5458 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINTO, KEVIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.371727
 Amount of Each Receipt this Period
 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. FITZGERALD, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.371728
 Amount of Each Receipt this Period
 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. FITZPATRICK, MICHAEL, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2016
Transaction ID : SA11A.371729
 Amount of Each Receipt this Period
 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5459 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOWERS, ROBERT, N.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11A.371730

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. FLYNN, AARON, M.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11A.371731

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. FLYNN, WILLIAM, M.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11A.371732

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5460 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FREEMAN, LAUREN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371733
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GALL, CHARLES, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371734
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GARROU, DOUGLAS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371735
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5461 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GEORGERIAN, KEVIN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371736
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GERHART, JOHN, T., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371737
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GEYER, ANDREW, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371738
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5462 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. GIESE, JEFFREY, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371739
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GIRAGOSIAN, C, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371740
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GLASGOW, RYAN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371741
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5463 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRANGER, DOUGLAS, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11A.371742

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. GRASSO, LAURIE, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11A.371743

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. GRIFFITH, GRETA, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11A.371744

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5464 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAAS, STEVEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371745
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HAGER, BRIAN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371746
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HAHN, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371747
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5465 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HALE, JARRETT, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371748

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. HARBOUR, JASON, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371749

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. HARVEY, JEFFREY, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371750

Amount of Each Receipt this Period
11.58

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5466 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYNES, RUDENE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371751
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HEDBERG, MARK, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371752
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HESSE, GREGORY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371753
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5467 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HIGBEE, DAVID, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371754
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HINER, THOMAS, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371755
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HOFFMAN, D, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371756
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5468 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HOGFOSS, ROBERT, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371757
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. HOLZGRAEFE, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371758
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. HOWELL, GEORGE, C., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.58

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371759
 Amount of Each Receipt this Period 11.58
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5469 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. HULL, KEVIN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371760
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. ISANI, JAMIE, Z., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371761
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. ITKIN, JUDITH, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371762
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5470 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JABER, MAKRAM, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371763
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. JARVIS, LORI, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371764
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. JENKINS, MATTHEW, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371765
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5471 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. JOHNSON, HARRY, M., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371766

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. JONES, KEVIN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371767

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. JONES, LAURA, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371768

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5472 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JORDANGER, DAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371769
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. KENYON, DOUGLAS, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371770
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. KERRIGAN, MICHAEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371771
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5473 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KETCHUM, RYAN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371772
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. KIMPEL, SCOTT, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371773
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. KNAUSS, CHARLES, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371774
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5474 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KOEHLER, EDWARD, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **11.57**

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.371775
 Amount of Each Receipt this Period **11.57**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. KULP, CHRISTOPHER, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **11.57**

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.371776
 Amount of Each Receipt this Period **11.57**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. LANDIN, DAVID, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **11.57**

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.371777
 Amount of Each Receipt this Period **11.57**
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5475 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LARKIN, KURT, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016
Transaction ID : SA11A.371778

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. LAWRENCE, ANDREW, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016
Transaction ID : SA11A.371779

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

C. LEE, COREY, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016
Transaction ID : SA11A.371780

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5476 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, BRENT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371781
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. LITTLE, CATHERINE, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371782
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. LONG, NASH, E., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371783
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5477 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LOWMAN, DAVID, S., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371784
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MADDRY, TYLER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371785
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MAISOG, MANUEL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371786
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5478 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARCUIS, ALAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371787
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MARGARIT, FERNANDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371788
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MARSHALL, LAURA, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371789
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5479 OF 5722
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARTIN, JOHN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371790

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. MARTINEZ, WALFRIDO, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371791

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. MATHEWS, LAURIE, U., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371792

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5480 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAYNARD, JOHN, G., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371793

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. MCBRIDE, WILLIAM, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371794

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. MCCANN, MICHAEL, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371795

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5481 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCRAE, JANET, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371796
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MCGEOCH, ALEXANDER, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371797
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MCGRANAHAN, JOHN, C., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371798
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 0.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5482 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MEMBIELA, GUSTAVO, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371799
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MENDIETA, URIEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371800
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MIGNONE, PETER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371801
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5483 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MITCHELL, PATRICK, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371802
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MOORE, T, J., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371803
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MOORE, THURSTON, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371804
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5484 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORTIMER, ANN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371805
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MOWER, JAY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371806
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. MUELLER, MICHAEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371807
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5485 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MURDOCK, ERIC, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371808

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. MURPHY, TED, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371809

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. MURPHY, THOMAS, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371810

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5486 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUSTONE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371811
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. NAUGHTON, JAMES, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371812
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. NEDELL, ERIC, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371813
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5487 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEDZBALA, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371814

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. NEWTON, WILLIAM, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371815

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. NUNLEY, LONNIE, D., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371816

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5488 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. O' BRIEN, PETER, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371818

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. O' CONNOR, JOHN, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371819

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. O' NEILL, JOHN, D., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371821

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5489 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OAKES, MICHAEL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371817
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. OH, CECILIA, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371820
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. OTERO, BRIAN, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371822
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5490 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, RANDALL, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371823

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. PARTEE, PETER, S., , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371824

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. PATTERSON, J, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371825

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5491 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PETKOSKI, DJORDJE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371826
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. PINNA, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371827
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. POSORSKE, LAURENCE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371828
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5492 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWELL, KURTIS, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371829
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. POWELL, LEWIS, F., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371830
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. QUACKENBOSS, ROBERT, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371831
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5493 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANGE, JOHN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371832
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. RECTOR, BAKER, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371833
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. REGAN, SHAWN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371834
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5494 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. REWARI, SONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371835
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. RICE, THOMAS, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371836
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. RITTER, JENNINGS, G., , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371837
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5495 OF 5722
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBB, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371838

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. ROBERTSON, DARYL, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371839

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. ROBERTSON, GREGORY, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371840

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5496 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROLFE, ROBERT, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371841

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. ROSSER, BRENT, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371842

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. ROWE, WILLIAM, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371843

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5497 OF 5722
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUBY, MARGUERITE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371844
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SCHMITT, GREGORY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371845
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SCHNEIDER, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371846
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5498 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SCOVILLE, MATTHEW, A., ,

Mailing Address **2200 PENNSYLVANIA AVE NW**

City **WASHINGTON** State **DC** Zip Code **20037-1709**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **HUNTON & WILLIAMS** Occupation (for Individual) **PARTNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **11.57**

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.371847

Amount of Each Receipt this Period **11.57**

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEEVERS, JAMES, S., , JR.

Mailing Address **2200 PENNSYLVANIA AVE NW**

City **WASHINGTON** State **DC** Zip Code **20037-1709**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **HUNTON & WILLIAMS** Occupation (for Individual) **PARTNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **11.57**

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.371848

Amount of Each Receipt this Period **11.57**

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SELBY, DOUGLASS, P., ,

Mailing Address **2200 PENNSYLVANIA AVE NW**

City **WASHINGTON** State **DC** Zip Code **20037-1709**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **HUNTON & WILLIAMS** Occupation (for Individual) **PARTNER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **11.57**

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.371849

Amount of Each Receipt this Period **11.57**

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5499 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHARP, JOEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371850
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SHEBELSKIE, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371851
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SHORES, RYAN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371852
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5500 OF 5722
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIBLEY, GEORGE, P., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371853

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. SIMONE, DONALD, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371854

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. SIMPSON, AARON, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371855

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5501 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. SIRGADO, JO ANNE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371856
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SKINNER, LAURENCE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371857
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SMITH, CARYL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371858
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5502 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, JOHN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371859
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. SMITH, ROBERT, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371860
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. SOTTO, LISA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371861
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5503 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANKO, JOSEPH, C., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371862

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. STENERSON, TODD, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371863

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. STILLMAN, GREG, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt

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07		27		2016

Transaction ID : SA11A.371864

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5504 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TANENBAUM, BRIAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371865
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. TAPSCOTT, ANDREW, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371866
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. TATA, ROBERT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371867
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5505 OF 5722
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, ERIC, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371868

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. TAYLOR, WENDELL, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371869

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. TAYLOR, WILLIAM, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371870

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5506 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, GARY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371871
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. TOLLEY, B, C., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371872
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. TURNER, ANDREW, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371873
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5507 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VIVARELLI, DANIEL, G., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371874
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. VOWELL, MARK, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371875
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. WAIT, AMANDA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371876
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5508 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARREN, RICHARD, L.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371877

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. WEHRUM, WILLIAM, L.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371878

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. WEINSTOCK, PETER, G.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt
MM / DD / YYYY
07 / 27 / 2016

Transaction ID : SA11A.371879

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5509 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISBLATT, ERIC, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371880
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. WEISS, MALCOLM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371881
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. WILLIAMS, AMY, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371882
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5510 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, EVAN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371883

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. WILLIAMSON, HOLLY, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371884

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. WILTSIE, SUSAN, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2200 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20037-1709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HUNTON & WILLIAMS	Occupation (for Individual) PARTNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
11.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2016

Transaction ID : SA11A.371885

Amount of Each Receipt this Period
11.57

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5511 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOOD, ALLISON, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371886
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. WYATT, RICHARD, L., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20037-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNTON & WILLIAMS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 11.57

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.371887
 Amount of Each Receipt this Period 11.57
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. INDIAN HILL, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 CORPORATE WAY
 City GRANTS PASS State OR Zip Code 97526-6812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367911
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW; REFUNDED \$259.30 ON 10/12/2016

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5512 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, SANDRA, K, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 360 TROLLY ST

City GRANTS PASS State OR Zip Code 97526-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDIAN HILL, LLC Occupation (for Individual) PARTNER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 82.66

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427978

Amount of Each Receipt this Period 82.66

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. KRAUSS, BENJAMIN, J, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2420 17TH AVE NW

City OLYMPIA State WA Zip Code 98502-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDIAN HILL, LLC Occupation (for Individual) PARTNER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 175.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427974

Amount of Each Receipt this Period 175.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. KRAUSS, CAMERON, L, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83271 GREEN BLUFF DR

City CRESWELL State OR Zip Code 97426-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDIAN HILL, LLC Occupation (for Individual) PARTNER

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 175.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427975

Amount of Each Receipt this Period 175.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5513 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSS, JOHN, P, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 CORPORATE WAY

City GRANT PASS State OR Zip Code 97526-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDIAN HILL LLC Occupation (for Individual) PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427972

Amount of Each Receipt this Period 200.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. KRAUSS, JOSEPH, P, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 328 BELLEWOOD DR

City GRANTS PASS State OR Zip Code 97527-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDIAN HILL LLC Occupation (for Individual) PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427973

Amount of Each Receipt this Period 175.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. KRAUSS, KATHRYN, A, MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4508 DODGE RD

City WHITE CITY State OR Zip Code 97503-

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDIAN HILL, LLC Occupation (for Individual) PARTNER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 175.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427976

Amount of Each Receipt this Period 175.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5514 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KRAUSS, KURT, F, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 123 N VALLEY DR
City GRANTS PASS State OR Zip Code 97526-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INDIAN HILL, LLC Occupation (for Individual) PARTNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1083.04

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427977
Amount of Each Receipt this Period 1083.04
 Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. KRAUSS, SHARON, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 678 BELLEWOOD DR
City GRANTS PASS State OR Zip Code 97527-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INDIAN HILL, LLC Occupation (for Individual) PARTNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 175.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.427979
Amount of Each Receipt this Period 175.00
 Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

C. KELLER LOGGING CO.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4418 KELLER RD
City ROSEBURG State OR Zip Code 97470-5227
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.367916
Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION
REFUNDED \$2,500.00 ON 09/23/2016

SUBTOTAL of Receipts This Page (optional).....▶ 2500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5515 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NANCO ASSOCIATES LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8940 MAIN ST

City CLARENCE State NY Zip Code 14031-1959

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.385405

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW

B. NANULA, ANTHONY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17848 OLD WINEMASTER WAY

City POWAY State CA Zip Code 92064-1062

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AN CONSULTING Occupation (for Individual) INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.393062

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. NANULA, PAUL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8875 CAMBRIDGE CT

City EAST AMHERST State NY Zip Code 14051-2349

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NANCO Occupation (for Individual) INVESTOR

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.393060

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5516 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NANULA, PHIL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9535 LAKESTONE CT
City CLARENCE State NY Zip Code 14031-2419
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) ESSEX HOMES Occupation (for Individual) OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.393059
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. NANULA, STEVE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5050 ROCKHAVEN DR
City CLARENCE State NY Zip Code 14031-2435
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) PD VENTURES Occupation (for Individual) CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11A.393061
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

C. NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CONTRIBUTION ACCOUNT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 720 E WISCONSIN AVE
City MILWAUKEE State WI Zip Code 53202-4703
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407229
Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION
SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5517 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARBI, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6620 N LAKE DR
 City FOX POINT State WI Zip Code 53217-4245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407230
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

B. CARTER, MICHAEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7322 N MOHAWK ROAD
 City FOX POINT State WI Zip Code 53217-3454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407231
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

C. GROGAN, JOHN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7860 N CLUB CIRCLE
 City MILWAUKEE State WI Zip Code 53217-2939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) SENIOR VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2016
Transaction ID : SA11A.407232
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION
 EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5518 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEWITT, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2045 ELM TREE RD

City ELM GROVE	State WI	Zip Code 53122-1117
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWESTERN MUTUAL	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407233

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

B. JOELSON, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 N PROSPECT AVE STE U

City MILWAUKEE	State WI	Zip Code 53202-3979
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWESTERN MUTUAL	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407234

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

C. MANISTA, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7236 N CROSSWAY RD

City FOX POINT	State WI	Zip Code 53217-3519
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWESTERN MUTUAL	Occupation (for Individual) SVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11A.407235

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5519 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RODENHUIS, BETHANY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 N LAKE DR
 City SHOREWOOD State WI Zip Code 53211-2448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407236
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

B. SCHNEIDER, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4380 N WILDWOOD AVE
 City SHOREWOOD State WI Zip Code 53211-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407237
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION
 EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

C. SIMBRO, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 E ERIE ST UNIT 4
 City MILWAUKEE State WI Zip Code 53202-6040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11A.407238
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5520 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YORK, CONRAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1313 N FRANKLIN PLACE
UNIT 103

City MILWAUKEE State WI Zip Code 53202-2980

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) VP MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407239

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

B. ZALE, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2818 E MENLO BLVD

City SHOREWOOD State WI Zip Code 53211-2652

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) VP REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.407240

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM NORTHWESTERN MUTUAL LIFE INDIVIDUAL POLITICAL CO

C. PENNROSE DEVELOPMENT, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 230 WYOMING AVE

City KINGSTON State PA Zip Code 18704-3535

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11A.396551

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5521 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNHART, RICHARD, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 EVANS LN

City HAVERFORD State PA Zip Code 19041-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PENNROSE Occupation (for Individual) CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.407261

Amount of Each Receipt this Period 2250.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. DAMBLY, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 354 DARLINGTON ROAD

City MEDIA State PA Zip Code 19063-5504

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PENNROSE PROPERTIES LLC Occupation (for Individual) CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.407262

Amount of Each Receipt this Period 2250.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. HENKEL, TIMOTHY, I., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 462 BARCLAY RD

City ROSEMONT State PA Zip Code 19010-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PENNROSE PROPERTIES Occupation (for Individual) REAL ESTATE DEVELOPER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.407263

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5522 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PHILLIPS LYTLE LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 MAIN ST

City BUFFALO	State NY	Zip Code 14203-3070
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.385404

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

B. SCHMIDT, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 MAIN ST

City BUFFALO	State NY	Zip Code 14203-3070
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHILLIPS LYTLE LLP	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SA11A.420474

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. PRAIRIE PINES LTD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1922 124TH ST

City LUBBOCK	State TX	Zip Code 79423-6523
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SA11A.360307

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

REFUNDED \$250.00 ON 09/27/2016

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5523 OF 5722
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RGLAIR, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7764 S ELM CT

City CENTENNIAL	State CO	Zip Code 80122-3828
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
08 / 19 / 2016
Transaction ID : SA11A.371586

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

REFUNDED \$500.00 ON 09/23/2016

B. SCHWARZ PARTNERS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3600 WOODVIEW TRACE STE 300

City INDIANAPOLIS	State IN	Zip Code 46268-3123
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
08 / 23 / 2016
Transaction ID : SA11A.375542

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

REFUNDED \$50,000.00 ON 09/23/2016

C. SENECA SUSTAINABLE ENERGY, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 851

City EUGENE	State OR	Zip Code 97440-0851
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11A.367912

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	55500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5524 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES, JODY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 851

City EUGENE	State OR	Zip Code 97440-0851
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SENECA SUSTAINABLE ENERGY, LLC		Occupation (for Individual) PARTNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.67	

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.379202

Amount of Each Receipt this Period
1666.67

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

B. JONES-MCCANN, KATHLEEN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 851

City EUGENE	State OR	Zip Code 97440-0851
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SENECA SUSTAINABLE ENERGY, LLC		Occupation (for Individual) PARTNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.67	

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.379201

Amount of Each Receipt this Period
1666.67

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. JONES, REBECCA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 851

City EUGENE	State OR	Zip Code 97440-0851
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SENECA SUSTAINABLE ENERGY, LLC		Occupation (for Individual) PARTNER SENECA SUSTAINABLE EN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1666.66	

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11A.379200

Amount of Each Receipt this Period
1666.66

Memo Item CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5525 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOUTHPORT FOREST PRODUCTS, LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 298

City COOS BAY	State OR	Zip Code 97420-0031
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.367915

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

B. LYONS, JIM, , MR.,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 298

City COOS BAY	State OR	Zip Code 97420-0031
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHPORT FOREST PRODUCTS LLC	Occupation (for Individual) MEMBER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.375553

Amount of Each Receipt this Period
1250.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. SMITH, JASON, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 298

City COOS BAY	State OR	Zip Code 97420-0031
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHPORT FOREST PRODUCTS	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11A.375552

Amount of Each Receipt this Period
1250.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5526 OF 5722
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRADLEY RONON STEVENS & YOUNG LLP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2005 MARKET ST STE 2600

City PHILADELPHIA	State PA	Zip Code 19103-7018
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.347102

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

B. SASSO, WILLIAM, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2005 MARKET ST STE 2600

City PHILADELPHIA	State PA	Zip Code 19103-7018
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
STRADLEY RONON ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Transaction ID : SA11A.361891

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. THE MICHAELS DEVELOPMENT CO, LP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 994

City MARLTON	State NJ	Zip Code 08053-0994
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11A.390043

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5527 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEVITT, MICHAEL, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 E STOW RD STE 100

City MARLTON	State NJ	Zip Code 08053-3188
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MICHAELS DEVELOPMENT CO	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 08 / 2016
Transaction ID : SA11A.400494

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

B. THE WALLICK COMPANIES, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1023

City COLUMBUS	State OH	Zip Code 43216-1023
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11A.398485

Amount of Each Receipt this Period
1500.00

Memo Item CONTRIBUTION
SEE ATTRIBUTION BELOW

C. WALLICK, JULIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1023

City COLUMBUS	State OH	Zip Code 43216-1023
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE WALLICK COMPANIES, LLC	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11A.398487

Amount of Each Receipt this Period
1500.00

Memo Item CONTRIBUTION
PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5528 OF 5722
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS P DANCO CONSULTING (SOLE PROPRIETORSHIP)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11150 SANTA MONICA BLVD STE 800

City LOS ANGELES	State CA	Zip Code 90025-3331
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2016
Transaction ID : SA11A.347103

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

B. DANCO, THOMAS, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11150 SANTA MONICA BLVD #800

City LOS ANGELES	State CA	Zip Code 90025-3331
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
SELF EMPLOYED INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2016
Transaction ID : SA11A.361554

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. TIMBER PRODUCTS COMPANY LP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 269

City SPRINGFIELD	State OR	Zip Code 97477-0055
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2016
Transaction ID : SA11A.356686

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	60000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5529 OF 5722
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GONYEA, DAVID, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 269
 City SPRINGFIELD State OR Zip Code 97477-0055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIMBER PRODUCTS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4217.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.361887
 Amount of Each Receipt this Period
 4217.49
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. GONYEA, JOSEPH, H., MR, II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 269
 City SPRINGFIELD State OR Zip Code 97477-0055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIMBER PRODUCTS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 937.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.361885
 Amount of Each Receipt this Period
 937.22
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. GONYEA, JOSEPH, H., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 269
 City SPRINGFIELD State OR Zip Code 97477-0055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIMBER PRODUCTS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4217.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.361886
 Amount of Each Receipt this Period
 4217.49
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5530 OF 5722
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GONYEA, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 269
 City SPRINGFIELD State OR Zip Code 97477-0055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.361889
 Amount of Each Receipt this Period
 226.19
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. MADDEN, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 269
 City SPRINGFIELD State OR Zip Code 97477-0055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.361888
 Amount of Each Receipt this Period
 226.19
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

C. STOWELL, MARY ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 269
 City SPRINGFIELD State OR Zip Code 97477-0055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 175.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016
Transaction ID : SA11A.361890
 Amount of Each Receipt this Period
 175.42
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5531 OF 5722
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WISCONSIN HOSPITAL ASSN. CONDUIT
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5510 RESEARCH PARK DR.
 City FITCHBURG State WI Zip Code 53711-5377
 FEC ID number of contributing federal political committee. **C** C00422881
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11C.390042
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW

B. LITTLE, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W5265 BECHAUD BEACH DR
 City FOND DU LAC State WI Zip Code 54935-1937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGNESIAN HEALTHCARE Occupation (for Individual) EXECUTIVE VP
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.390044
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WISCONSIN HOSPITAL ASSN. CONDUIT

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	12377192.27

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5532 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIENDS OF DAVE REICHERT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2032

City ISSAQUAH	State WA	Zip Code 98027-0090
FEC ID number of contributing federal political committee. C C00397737		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016
Transaction ID : SA11C.367869

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. FRIENDS OF EDWARD RATH III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1574

City WILLIAMSVILLE	State NY	Zip Code 14231-1574
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016
Transaction ID : SA11C.383560

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION
VERIFIED AS FEDERALLY PERMISSIBLE FUNDS

C. ACCENTURE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 800 CONNECTICUT AVE NW STE 600

City WASHINGTON	State DC	Zip Code 20006-2716
FEC ID number of contributing federal political committee. C C00300707		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016
Transaction ID : SA11C.396542

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5533 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AD ALLIANCE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **PO BOX 30844**

City BETHESDA	State MD	Zip Code 20824-0844
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00233353**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 21 / 2016
Transaction ID : SA11C.400510

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. AEGON PAC/TRANSAMERICA CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **600 13TH STREET NW SUITE 400B**

City WASHINGTON	State DC	Zip Code 20005-3008
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00236414**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11C.420494

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. ALASKA AIR GROUP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **19300 PACIFIC HIGHWAY SOUTH**

City SEATTLE	State WA	Zip Code 98188-
------------------------	--------------------	---------------------------

FEC ID number of contributing federal political committee. **C C00024349**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6000.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11C.367867

Amount of Each Receipt this Period
6000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5534 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERICAN ACADEMY OF PEDIATRIC DENTISTRY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 211 E CHICAGO AVENUE
SUITE 700
City CHICAGO State IL Zip Code 60611-2663
FEC ID number of contributing federal political committee. **C** C00365965
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11C.396544
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. AMERICAN COUNCIL OF ENGINEERING CO. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1015 15TH STREET NW
SUITE 802
City WASHINGTON State DC Zip Code 20005-2605
FEC ID number of contributing federal political committee. **C** C00010868
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11C.367069
Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. AMERICAN COUNCIL OF LIFE INSURERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 CONSTITUTION AVE., NW
SUITE 700
City WASHINGTON State DC Zip Code 20001-2133
FEC ID number of contributing federal political committee. **C** C00147066
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11C.420476
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5535 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AMERICAN COLLEGE OF CARDIOLOGY PAC

Mailing Address 2400 N STREET NW

City WASHINGTON	State DC	Zip Code 20037-1153
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Transaction ID : SA11C.420490

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AMERICAN FAMILY MUTUAL INSURANCE CO. PAC

Mailing Address 6000 AMERICAN PARKWAY

City MADISON	State WI	Zip Code 53783-0001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2016

Transaction ID : SA11C.346395

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AMERICAN FINANCIAL SERVICES ASSOC.(AFSA PAC)

Mailing Address 919 18TH STREET, NW
SUITE 300

City WASHINGTON	State DC	Zip Code 20006-5526
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2016

Transaction ID : SA11C.354266

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5536 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERICAN FAMILY MUTUAL INSURANCE CO. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6000 AMERICAN PARKWAY

City MADISON	State WI	Zip Code 53783-0001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11C.390034

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. AMERICAN HEALTH CARE ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 L ST NW

City WASHINGTON	State DC	Zip Code 20005-4024
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Transaction ID : SA11C.380921

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. AMERICAN INVESTMENT COUNCIL PAC (AIC PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 950 F ST NW

City WASHINGTON	State DC	Zip Code 20004-1438
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00495002

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11C.346074

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5537 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PALLADIAN 1

City DURHAM	State NC	Zip Code 27707-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11C.356839

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AMERICAN MEDICAL ASSOCIATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 MASSACHUSETTS AVENUE NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20001-7400
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11C.390032

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. AMERICAN OPTOMETRIC ASSOCIATION AOAPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA	State VA	Zip Code 22314-2874
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Transaction ID : SA11C.358857

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5538 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERICAN OPTOMETRIC ASSOCIATION AOAPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2016

Transaction ID : SA11C.360305

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. APOLLO EDUCATION GROUP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4025 S. RIVERPOINT PKWY
MS CF-KX10

City PHOENIX State AZ Zip Code 85040-0723

FEC ID number of contributing federal political committee. **C** C00309781

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11C.379100

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. APRIA HEALTHCARE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26220 ENTERPRISE COURT

City LAKE FOREST State CA Zip Code 92630-8405

FEC ID number of contributing federal political committee. **C** C00240218

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11C.396602

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5539 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASPLUNDH TREE EXPERT PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 708 BLAIR MILL ROAD

City WILLOW GROVE	State PA	Zip Code 19090-1701
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00177741

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2016

Transaction ID : SA11C.358851

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. ASSOCIATED OREGON LOGGERS FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2015 MADRONA AVE SE

City SALEM	State OR	Zip Code 97302-1149
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00318816

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2016

Transaction ID : SA11C.367871

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 N HENRY STREET

City ALEXANDRIA	State VA	Zip Code 22314-2903
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010124

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11C.390033

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	21000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5540 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASF CORPORATION EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 PARK AVENUE

City FLORHAM PARK	State NJ	Zip Code 07932-1049
FEC ID number of contributing federal political committee. C C00340075		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016
Transaction ID : SA11C.354420

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. BASF CORPORATION EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 PARK AVENUE

City FLORHAM PARK	State NJ	Zip Code 07932-1049
FEC ID number of contributing federal political committee. C C00340075		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016
Transaction ID : SA11C.420496

Amount of Each Receipt this Period
1250.00

Memo Item
CONTRIBUTION

C. BAYER CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 BAYER ROAD

City PITTSBURGH	State PA	Zip Code 15205-9707
FEC ID number of contributing federal political committee. C C00281162		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016
Transaction ID : SA11C.396545

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5541 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BIOTECHNOLOGY IND. ORGANIZATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 MARYLAND AVENUE SW
SUITE 900
City WASHINGTON State DC Zip Code 20024-6129
FEC ID number of contributing federal political committee. **C** C00355677
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11C.420469
Amount of Each Receipt this Period 3000.00
 Memo Item
CONTRIBUTION

B. BNSF RAILWAY COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 961039
City FORT WORTH State TX Zip Code 76161-0039
FEC ID number of contributing federal political committee. **C** C00235739
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11C.367359
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. BP NORTH AMERICAN EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 WESTLAKE PARK BOULEVARD
City HOUSTON State TX Zip Code 77079-2604
FEC ID number of contributing federal political committee. **C** C00060103
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11C.346392
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5542 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRACEPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 K STREET NW
SUITE 500

City WASHINGTON State DC Zip Code 20006-1809

FEC ID number of contributing federal political committee. **C** C00021295

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11C.379096

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. BRACEPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2000 K STREET NW
SUITE 500

City WASHINGTON State DC Zip Code 20006-1809

FEC ID number of contributing federal political committee. **C** C00021295

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11C.420483

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. BRISTOL-MEYERS SQUIBB CO. EMPLOYEE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2615

FEC ID number of contributing federal political committee. **C** C00035675

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11C.354419

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5543 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYAN CAVE LLP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 F STREET NW STE 700

City WASHINGTON	State DC	Zip Code 20004-1361
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00332643

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11C.363939

Amount of Each Receipt this Period
6000.00

Memo Item
CONTRIBUTION

B. CABOT OIL & GAS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 840 GESSNER ROAD SUITE 1400

City HOUSTON	State TX	Zip Code 77024-4152
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00486050

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : SA11C.391523

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. CATERPILLAR EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 NE ADAMS STREET

City PEORIA	State IL	Zip Code 61629-0001
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11C.360810

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5544 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CATERPILLAR EMPLOYEE PAC

Mailing Address 100 NE ADAMS STREET

City PEORIA	State IL	Zip Code 61629-0001
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

Transaction ID : SA11C.360814

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CELGENE CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 86 MORRIS AVENUE

City SUMMIT	State NJ	Zip Code 07901-3915
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00514331

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11C.400502

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CEMEX INC. EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 929 GESSNER ROAD
SUITE 1900

City HOUSTON	State TX	Zip Code 77024-2317
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00111880

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11C.396597

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5545 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CENTER FOR COASTAL CONSERVATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 8TH STREET, NW
SUITE 500

City WASHINGTON State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C** C00435024

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2016

Transaction ID : SA11C.379098

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

B. CHARLES SCHWAB CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 7TH STREET NW, SUITE 200

City WASHINGTON State DC Zip Code 20004-2827

FEC ID number of contributing federal political committee. **C** C00370114

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2016

Transaction ID : SA11C.346476

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CHARLES SCHWAB CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 7TH STREET NW, SUITE 200

City WASHINGTON State DC Zip Code 20004-2827

FEC ID number of contributing federal political committee. **C** C00370114

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11C.356836

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5546 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHEVRON EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 6016

City SAN RAMON	State CA	Zip Code 94583-0716
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FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : SA11C.390029

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

B. CHUBB-ACE GROUP HOLDINGS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 436 WALNUT STREET

City PHILADELPHIA	State PA	Zip Code 19106-3703
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00348938

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.420491

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CITIZENS CONCERNED ABOUT MISSOURI
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15 SQUIRES LANE

City ST LOUIS	State MO	Zip Code 63131-4811
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00382606

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11C.360306

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5547 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CME GROUP PAC (CHICAGO MERCANTILE)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016
Transaction ID : SA11C.420482

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. COHNREZNICK LLP POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7501 WISCONSIN AVE STE 400E

City BETHESDA	State MD	Zip Code 20814-6583
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00547216

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2016
Transaction ID : SA11C.379097

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. CONSTELLATION BRANDS INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 207 HIGH POINT DR

City VICTOR	State NY	Zip Code 14564-1061
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00304832

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
22000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016
Transaction ID : SA11C.390035

Amount of Each Receipt this Period
21000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	31000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5548 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CONTINENTAL RESOURCES, INC. PAC

Mailing Address **20 N BROADWAY**

City OKLAHOMA CITY	State OK	Zip Code 73102-9213
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00551184**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20400.00

Date of Receipt
07 / 12 / 2016

Transaction ID : SA11C.346037

Amount of Each Receipt this Period
5400.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CONTINUUM FUND OF ZACHRY HOLDINGS, INC. PAC

Mailing Address **527 LOGWOOD AVENUE**

City SAN ANTONIO	State TX	Zip Code 78221-1738
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00471565**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 08 / 2016

Transaction ID : SA11C.390031

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COOK GROUP INC PAC

Mailing Address **901 NEW YORK AVENUE NW
FRONT 3**

City WASHINGTON	State DC	Zip Code 20001-4832
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00399089**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 20 / 2016

Transaction ID : SA11C.396603

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5549 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COVINGTON & BURLING, LLP PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE CITYCENTER
 850 TENTH STREET, NW
 City WASHINGTON State DC Zip Code 20001-4956
 FEC ID number of contributing federal political committee. **C** C00462630
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11C.396600
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. CRAY INC. EMPLOYEE PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 18TH STREET
 SUITE 610
 City ARLINGTON State VA Zip Code 22202-3418
 FEC ID number of contributing federal political committee. **C** C00458547
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11C.402082
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. CREE INC PAC (CREE PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4600 SILICON DRIVE
 City DURHAM State NC Zip Code 27703-8475
 FEC ID number of contributing federal political committee. **C** C00499665
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11C.396546
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5550 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CSX CORPORATION GOOD GOVERNMENT FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1331 PENNSYLVANIA AVENUE NW
SUITE 560

City WASHINGTON State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 09 / 2016
Transaction ID : SA11C.360811

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. CULAC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 PENNSYLVANIA AVE NW STE. 600

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 09 / 2016
Transaction ID : SA11C.360809

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CUNA MUTUAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 747

City MADISON State WI Zip Code 53701-0747

FEC ID number of contributing federal political committee. **C** C00402107

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11C.385402

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5551 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CVS HEALTH PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1275 PENNSYLVANIA AVENUE, NW
SUITE 700

City WASHINGTON State DC Zip Code 20004-2448

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.420497

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

B. DAY & ZIMMERMAN FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 SPRING GARDEN STREET

City PHILADELPHIA State PA Zip Code 19130-4067

FEC ID number of contributing federal political committee. **C** C00341271

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.420498

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. DAY & ZIMMERMAN FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 SPRING GARDEN STREET

City PHILADELPHIA State PA Zip Code 19130-4067

FEC ID number of contributing federal political committee. **C** C00341271

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.420499

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5552 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DELAWARE NORTH COMPANIES INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40 FOUNTAIN PLAZA

City BUFFALO	State NY	Zip Code 14202-2229
FEC ID number of contributing federal political committee. C C00532887		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11C.385400

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. DELTA AIR LINES POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1212 NEW YORK AVENUE NW SUITE 200

City WASHINGTON	State DC	Zip Code 20005-6609
FEC ID number of contributing federal political committee. C C00104802		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11C.395808

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. DELTA AIR LINES POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1212 NEW YORK AVENUE NW SUITE 200

City WASHINGTON	State DC	Zip Code 20005-6609
FEC ID number of contributing federal political committee. C C00104802		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11C.396543

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	60000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5553 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DISCOVER FINANCIAL SERVICES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 8TH STREET NW SUITE 210

City WASHINGTON	State DC	Zip Code 20004-2131
FEC ID number of contributing federal political committee. C C00438051		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016
Transaction ID : SA11C.420504

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. EAGLE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 6312

City LIBERTYVILLE	State IL	Zip Code 60048-6312
FEC ID number of contributing federal political committee. C C00572123		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016
Transaction ID : SA11C.371556

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. ECHOSTAR CORP. AND DISH NETWORK CORP. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1110 VERMONT AVENUE NW SUITE 750

City WASHINGTON	State DC	Zip Code 20005-6322
FEC ID number of contributing federal political committee. C C00330647		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016
Transaction ID : SA11C.402080

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5554 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EDWARD JONES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12555 MANCHESTER ROAD

City SAINT LOUIS	State MO	Zip Code 63131-3710
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00410407

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11C.385399

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. ERNST & YOUNG PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 NEW YORK AVE NW

City WASHINGTON	State DC	Zip Code 20005-4269
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016

Transaction ID : SA11C.420488

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. FEDERAL FOREST RESOURCE COALITION PAC (FFRC PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 600 NEW HAMPSHIRE AVENUE NW
SUITE 500

City WASHINGTON	State DC	Zip Code 20037-2443
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00504753

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2016

Transaction ID : SA11C.363941

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	17500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5555 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FMR LLC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 200 SEAPORT BOULEVARD, V9B

City BOSTON	State MA	Zip Code 02210-2031
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : SA11C.390026

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. FOOD PAC (FOOD MARKETING INSTITUTE)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2345 CRYSTAL DRIVE SUITE 800

City ARLINGTON	State VA	Zip Code 22202-4813
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11C.375441

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. FOOD PAC (FOOD MARKETING INSTITUTE)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2345 CRYSTAL DRIVE SUITE 800

City ARLINGTON	State VA	Zip Code 22202-4813
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

Transaction ID : SA11C.375442

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5556 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRESH POLITICAL ACTION COMMITTEE (FRESH PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1901 PENNSYLVANIA AVENUE NW
SUITE 1100
City WASHINGTON State DC Zip Code 20006-3412
FEC ID number of contributing federal political committee. **C** C00040725
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11C.420468
Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. GENERIC PHARMACEUTICAL ASSOCIATION PAC (GPHA PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 777 6TH ST NW
STE 510
City WASHINGTON State DC Zip Code 20001-4498
FEC ID number of contributing federal political committee. **C** C00383463
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 26 / 2016
Transaction ID : SA11C.354418
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. GRANGE MUTUAL CASUALTY CO. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 671 SOUTH HIGH STREET
PO BOX 1218
City COLUMBUS State OH Zip Code 43206-1066
FEC ID number of contributing federal political committee. **C** C00302695
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11C.390041
Amount of Each Receipt this Period 1500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5557 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREEN DIAMOND RESOURCE CO PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1301 5TH AVE STE 2700

City SEATTLE	State WA	Zip Code 98101-2675
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00402321

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

Transaction ID : SA11C.356838

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. HALLPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2501 MCGEE MD288

City KANSAS CITY	State MO	Zip Code 64108-2615
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000059

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11C.420500

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. HCR MANOR CARE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 333 NORTH SUMMIT STREET 16TH FLOOR

City TOLEDO	State OH	Zip Code 43604-1531
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00260141

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11C.420467

Amount of Each Receipt this Period
20000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	32000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5558 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HECLA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6500 N MINERAL DRIVE SUITE 200

City COEUR D ALENE	State ID ID	Zip Code 83815-9408
-----------------------	----------------	------------------------

FEC ID number of contributing federal political committee. **C** C00124016

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

Transaction ID : SA11C.396601

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

B. HESS CORP. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1501 MCKINNEY STREET

City HOUSTON	State TX	Zip Code 77010-4010
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00557322

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Transaction ID : SA11C.402081

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. HILL ROM PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1069 STATE ROAD 46 E

City BATESVILLE	State IN	Zip Code 47006-7520
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00448993

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : SA11C.420470

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5559 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOLLAND & HART FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 555 SEVENTEENTH STREET
SUITE 3200
City DENVER State CO Zip Code 80202-3921
FEC ID number of contributing federal political committee. **C** C00137729
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 26 / 2016
Transaction ID : SA11C.379101
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. HUMANA INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 975 F STREET NW STE. 550
City WASHINGTON State DC Zip Code 20004-1458
FEC ID number of contributing federal political committee. **C** C00271007
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11C.346473
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. HUMANA INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 975 F STREET NW STE. 550
City WASHINGTON State DC Zip Code 20004-1458
FEC ID number of contributing federal political committee. **C** C00271007
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 26 / 2016
Transaction ID : SA11C.402074
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5560 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IAAPA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1448 DUKE STREET

City ALEXANDRIA	State VA	Zip Code 22314-3403
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144154

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.420501

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. INDEPENDENCE BLUE CROSS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103-1480
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2016

Transaction ID : SA11C.346389

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. INDEPENDENCE BLUE CROSS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103-1480
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2016

Transaction ID : SA11C.346390

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5561 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. INDEPENDENCE BLUE CROSS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1901 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103-1480
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2016

Transaction ID : SA11C.346391

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. INDEPENDENT COMMUNITY BANKERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1615 L STREET NW STE 900

City WASHINGTON	State DC	Zip Code 20036-5623
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11C.354265

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. INDEPENDENT COMMUNITY BANKERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1615 L STREET NW STE 900

City WASHINGTON	State DC	Zip Code 20036-5623
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11C.420475

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5562 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. INTEL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 F STREET NW
SUITE 1025

City WASHINGTON State DC Zip Code 20004-1342

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
09 / 26 / 2016
Transaction ID : SA11C.402069

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. J.R. SIMPLOT CO. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 27

City BOISE State ID Zip Code 83707-0027

FEC ID number of contributing federal political committee. **C** C00120873

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 26 / 2016
Transaction ID : SA11C.402071

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. JOHN HANCOCK LIFE INS CO PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 CONGRESS STREET
FLOOR 13

City BOSTON State MA Zip Code 02210-2805

FEC ID number of contributing federal political committee. **C** C00137265

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11C.367449

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 31500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5563 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JONES WALKER PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 ST. CHARLES AVENUE
49TH FLOOR

City NEW ORLEANS State LA Zip Code 70170-1000

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11C.396550

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. LIBERTY INTERACTIVE CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12300 LIBERTY BLVD.

City ENGLEWOOD State CO Zip Code 80112-7009

FEC ID number of contributing federal political committee. **C** C00442434

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11C.354425

Amount of Each Receipt this Period
7500.00

Memo Item
CONTRIBUTION

C. LIBERTY MEDIA CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12300 LIBERTY BLVD

City ENGLEWOOD State CO Zip Code 80112-7009

FEC ID number of contributing federal political committee. **C** C00508101

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016

Transaction ID : SA11C.367960

Amount of Each Receipt this Period
7500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 16000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5564 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LINCOLN NATIONAL CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1300 S CLINTON STREET
City FORT WAYNE State IN Zip Code 46802-3506
FEC ID number of contributing federal political committee. **C** C00110577
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11C.420492
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. LIVESTOCK MARKETING ASSOCIATION PAC (LMA-PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10510 NW AMBASSADOR DR.
City KANSAS CITY State MO Zip Code 64153-1278
FEC ID number of contributing federal political committee. **C** C00244400
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11C.346477
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. LOWPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1000 LOWES BOULEVARD
City MOORESVILLE State NC Zip Code 28117-8520
FEC ID number of contributing federal political committee. **C** C00251751
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11C.367864
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5565 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MANUFACTURED HOUSING INSTITUTE PAC

Mailing Address 2101 WILSON BOULEVARD
SUITE 610

City ARLINGTON State VA Zip Code 22201-3040

FEC ID number of contributing federal political committee. **C** C00043463

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11C.420493

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MARINETTE MARINE CORP PAC

Mailing Address 1600 ELY ST

City MARINETTE State WI Zip Code 54143-2434

FEC ID number of contributing federal political committee. **C** C00459453

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
09 / 08 / 2016
Transaction ID : SA11C.390040

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCGUIREWOODS FEDERAL PAC

Mailing Address 901 E CARY STREET

City RICHMOND State VA Zip Code 23219-4063

FEC ID number of contributing federal political committee. **C** C00225342

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
07 / 29 / 2016
Transaction ID : SA11C.356684

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	14500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5566 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MOLINA HEALTHCARE, INC. PAC		Date of Receipt MM / DD / YYYY 09 / 26 / 2016 Transaction ID : SA11C.402075
Mailing Address 200 OCEANGATE SUITE 100		Amount of Each Receipt this Period 5000.00
City LONG BEACH	State CA	Zip Code 90802-4317
FEC ID number of contributing federal political committee. C C00430256		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MONDELEZ INTERNATIONAL, INC. PAC		Date of Receipt MM / DD / YYYY 07 / 29 / 2016 Transaction ID : SA11C.356837
Mailing Address 975 F ST NW		Amount of Each Receipt this Period 2500.00
City WASHINGTON	State DC	Zip Code 20004-1454
FEC ID number of contributing federal political committee. C C00529073		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MORTGAGE GUARANTY INSURANCE CORP. PAC		Date of Receipt MM / DD / YYYY 09 / 30 / 2016 Transaction ID : SA11C.420503
Mailing Address ATTN: REGULATORY RELATIONS 250 E. KILBOURN AVE.		Amount of Each Receipt this Period 5000.00
City MILWAUKEE	State WI	Zip Code 53202-3102
FEC ID number of contributing federal political committee. C C00586859		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5567 OF 5722
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 PENNSYLVANIA AVENUE NW
SUITE 900

City WASHINGTON State DC Zip Code 20004-1016

FEC ID number of contributing federal political committee. **C** C00075341

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 08 / 2016

Transaction ID : SA11C.390036

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NADR PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 96503 30550

City WASHINGTON State DC Zip Code 20090-6503

FEC ID number of contributing federal political committee. **C** C00432757

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 30 / 2016

Transaction ID : SA11C.420502

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NAT'L ASSN. OF HOME BUILDERS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 15TH STREET, NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
09 / 08 / 2016

Transaction ID : SA11C.390027

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5568 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005-4171
FEC ID number of contributing federal political committee. C C00238725		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt
MM / DD / YYYY
07 / 15 / 2016
Transaction ID : SA11C.346393

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NATIONAL ASSOCIATION OF REALTORS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 430 NORTH MICHIGAN AVE.

City CHICAGO	State IL	Zip Code 60611-4011
FEC ID number of contributing federal political committee. C C00030718		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12000.00	

Date of Receipt
MM / DD / YYYY
09 / 08 / 2016
Transaction ID : SA11C.390028

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005-4171
FEC ID number of contributing federal political committee. C C00238725		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt
MM / DD / YYYY
09 / 15 / 2016
Transaction ID : SA11C.393892

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5569 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATIONAL ASPHALT PAVEMENT ASSOCIATION POLITICAL ACTION COMMI
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 600 W

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00444539

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11C.420478

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTI
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3138 10TH STREET NORTH

City ARLINGTON State VA Zip Code 22201-2160

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11C.420489

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 DANGERFIELD RD

City ALEXANDRIA State VA Zip Code 22314-2886

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11C.367360

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 9500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5570 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 100 DANGERFIELD RD
City ALEXANDRIA State VA Zip Code 22314-2886
FEC ID number of contributing federal political committee. **C** C00030809
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11C.367447
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. NATIONAL FUEL GAS FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6363 MAIN STREET
City WILLIAMSVILLE State NY Zip Code 14221-5855
FEC ID number of contributing federal political committee. **C** C00083758
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 07 / 15 / 2016
Transaction ID : SA11C.346394
Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. NATIONAL FUEL GAS FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6363 MAIN STREET
City WILLIAMSVILLE State NY Zip Code 14221-5855
FEC ID number of contributing federal political committee. **C** C00083758
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11C.385407
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5571 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. NATIONAL HEALTH CORPORATION PAC

Mailing Address P.O. BOX 1398

City MURFREESBORO	State TN	Zip Code 37133-1398
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00153445

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

Transaction ID : SA11C.402072

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NATIONAL STRUCTURED SETTLEMENTS TRADE ASSOC. PAC

Mailing Address 1100 NEW YORK AVE NW
STE. 750W

City WASHINGTON	State DC	Zip Code 20005-3934
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00219444

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		15		2016

Transaction ID : SA11C.346474

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NATIONAL SHOOTING SPORTS FOUNDATION PAC

Mailing Address 400 N. CAPITOL STREET NW
SUITE 490

City WASHINGTON	State DC	Zip Code 20001-6509
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00480863

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		26		2016

Transaction ID : SA11C.379099

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	22000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5572 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NATIONAL VENTURE CAPITAL ASSN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 MASSACHUSETTS AVE NW
SUTIE 730

City WASHINGTON State DC Zip Code 20001-7401

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
09 / 30 / 2016
Transaction ID : SA11C.420487

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. NELNET HIGHER EDUCATION ACCESS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 CONNECTICUT AVENUE NW

City WASHINGTON State DC Zip Code 20036-5303

FEC ID number of contributing federal political committee. **C** C00370015

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11C.396547

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NFIB SAFE TRUST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 F STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11C.367361

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5573 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. NFIB SAFE TRUST		Date of Receipt
Mailing Address 1201 F STREET NW SUITE 200		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20004-1221
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00101105"/>		Transaction ID : SA11C.367448
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="7500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NIXON PEABODY LLP PAC		Date of Receipt
Mailing Address 1300 CLINTON SQUARE		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City ROCHESTER	State NY	Zip Code 14604-1707
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00404178"/>		Transaction ID : SA11C.402070
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. NORTHWESTERN MUTUAL PAC		Date of Receipt
Mailing Address 720 E WISCONSIN AVE		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City MILWAUKEE	State WI	Zip Code 53202-4703
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00197095"/>		Transaction ID : SA11C.402064
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="30000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="27500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5574 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NORTHWESTERN MUTUAL PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 E WISCONSIN AVE

City MILWAUKEE	State WI	Zip Code 53202-4703
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11C.402065

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. NUCOR CORP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1915 REXFORD ROAD

City CHARLOTTE	State NC	Zip Code 28211-3465
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00379628

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11C.402077

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. OCEAN SPRAY CRANBERRIES, INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 OCEAN SPRAY DRIVE

City MIDDLEBORO	State MA	Zip Code 02349-1000
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00114702

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11C.402068

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	16000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5575 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OCEAN SPRAY CRANBERRIES, INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 OCEAN SPRAY DRIVE

City MIDDLEBORO	State MA	Zip Code 02349-1000
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00114702

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

Transaction ID : SA11C.402076

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 CONNECTICUT AVENUE NW
SUITE 1100

City WASHINGTON	State DC	Zip Code 20036-5318
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00368142

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Transaction ID : SA11C.420481

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. ORBITAL ATK INC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 WILSON BLVD
SUITE 1100

City ARLINGTON	State VA	Zip Code 22209-2313
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00250209

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Transaction ID : SA11C.420484

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5576 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OSHKOSH CORP EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2566

City OSHKOSH	State WI	Zip Code 54903-2566
FEC ID number of contributing federal political committee. C C00304477		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt
MM / DD / YYYY
09 / 30 / 2016
Transaction ID : SA11C.420495

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. PACIFIC LIFE INSURANCE COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 NEWPORT CENTER DR

City NEWPORT BEACH	State CA	Zip Code 92660-6307
FEC ID number of contributing federal political committee. C C00068528		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
07 / 26 / 2016
Transaction ID : SA11C.354264

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. PACIFIC LIFE INSURANCE COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 NEWPORT CENTER DR

City NEWPORT BEACH	State CA	Zip Code 92660-6307
FEC ID number of contributing federal political committee. C C00068528		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016
Transaction ID : SA11C.358856

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5577 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACIFIC SEAFOOD PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1900 W EMERSON PLACE STE 205

City SEATTLE	State WA	Zip Code 98119-1649
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00193672

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2016

Transaction ID : SA11C.367868

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. PETROLEUM MARKETERS ASSOCIATION OF AMERICA'S
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1901 NORTH FORT MYER DRIVE SUITE 500

City ARLINGTON	State VA	Zip Code 22209-1609
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035204

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2016

Transaction ID : SA11C.346072

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. PORTLAND CEMENT ASSOCIATION INC. PCA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 NEW JERSEY AVENUE NW FLOOR 7

City WASHINGTON	State DC	Zip Code 20001-2066
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00237065

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2016

Transaction ID : SA11C.402078

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5578 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POTLATCH EMPLOYEES POLITICAL FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 W 1ST AVENUE
SUITE 1600

City SPOKANE State WA Zip Code 99201-3807

FEC ID number of contributing federal political committee. **C** C00041608

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11C.367862

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. PREMIERA BLUE CROSS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7001 220TH STREET SW
MS 355

City MOUNTLAKE TERRACE State WA Zip Code 98043-2160

FEC ID number of contributing federal political committee. **C** C00409227

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11C.367870

Amount of Each Receipt this Period
6000.00

Memo Item
CONTRIBUTION

C. PREMIERA BLUE CROSS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7001 220TH STREET SW
MS 355

City MOUNTLAKE TERRACE State WA Zip Code 98043-2160

FEC ID number of contributing federal political committee. **C** C00409227

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2016

Transaction ID : SA11C.400500

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5579 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PROPERTY CASUALTY INS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 444 N CAPITOL STREET NW
SUITE 801

City WASHINGTON State DC Zip Code 20001-1508

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 30 / 2016
Transaction ID : SA11C.420479

Amount of Each Receipt this Period: 2500.00

Memo Item CONTRIBUTION

B. PRUDENTIAL FINANCIAL INC FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 751 BROAD STREET

City NEWARK State NJ Zip Code 07102-3714

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 07 / 12 / 2016
Transaction ID : SA11C.346071

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

C. PRUDENTIAL FINANCIAL STATE & FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 751 BROAD STREET
14TH FLOOR

City NEWARK State NJ Zip Code 07102-3714

FEC ID number of contributing federal political committee. **C** C00493304

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 07 / 12 / 2016
Transaction ID : SA11C.346073

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5580 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAYONIER GOOD GOVERNMENT COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **ONE ENTERPRISE CENTER
225 WATER STREET, SUITE 1400**
City **JACKSONVILLE** State **FL** Zip Code **32202-5175**
FEC ID number of contributing federal political committee. **C C00451757**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **08 / 17 / 2016**
Transaction ID : SA11C.367865
Amount of Each Receipt this Period **2500.00**
 Memo Item
CONTRIBUTION

B. RBC USA HOLDCO CORP. FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **3 WORLD FINANCIAL CENTER
200 VESEY ST**
City **NEW YORK** State **NY** Zip Code **10281-1013**
FEC ID number of contributing federal political committee. **C C00517052**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **09 / 20 / 2016**
Transaction ID : SA11C.396599
Amount of Each Receipt this Period **2500.00**
 Memo Item
CONTRIBUTION

C. RETAIL LEADERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **1700 N MOORE STREET
SUITE 2250**
City **ARLINGTON** State **VA** Zip Code **22209-1933**
FEC ID number of contributing federal political committee. **C C00112763**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **09 / 26 / 2016**
Transaction ID : SA11C.402067
Amount of Each Receipt this Period **3000.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5581 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS AMERICAN PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 718
401 N MAIN STREET

City WINSTON SALEM State NC Zip Code 27102-0718

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11C.395809

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. REYNOLDS AMERICAN PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 718
401 N MAIN STREET

City WINSTON SALEM State NC Zip Code 27102-0718

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
09 / 20 / 2016
Transaction ID : SA11C.396548

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. RR DONNELLEY GOOD GOVERNMENT FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 SOUTH WACKER DR.

City CHICAGO State IL Zip Code 60606-4302

FEC ID number of contributing federal political committee. **C** C00033977

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11C.367872

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 25000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5582 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SC JOHNSON & SON EMPLOYEE (SCJPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1667 K STREET NW
SUITE 650
City WASHINGTON State DC Zip Code 20006-1652
FEC ID number of contributing federal political committee. **C** C00342246
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3400.00

Date of Receipt 08 / 09 / 2016
Transaction ID : SA11C.363940
Amount of Each Receipt this Period 2400.00
 Memo Item
CONTRIBUTION

B. SC JOHNSON & SON EMPLOYEE (SCJPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1667 K STREET NW
SUITE 650
City WASHINGTON State DC Zip Code 20006-1652
FEC ID number of contributing federal political committee. **C** C00342246
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3400.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11C.390030
Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. SCOT FORGE COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8001 WINN RD
City SPRING GROVE State IL Zip Code 60081-9687
FEC ID number of contributing federal political committee. **C** C00580589
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11C.396598
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5583 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENIOR CARE PHARMACY COALITION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 13TH STREET NW
11TH FLOOR

City WASHINGTON State DC Zip Code 20005-3822

FEC ID number of contributing federal political committee. **C** C00615203

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 08 / 30 / 2016
Transaction ID : SA11C.380920

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

B. SENIORS HOUSING PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5225 WISCONSIN AVE NW STE 502

City WASHINGTON State DC Zip Code 20015-2034

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 09 / 26 / 2016
Transaction ID : SA11C.402066

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

C. SENIORS HOUSING PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5225 WISCONSIN AVE NW STE 502

City WASHINGTON State DC Zip Code 20015-2034

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 09 / 26 / 2016
Transaction ID : SA11C.402073

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5584 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SENTRY INSURANCE FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 EAST DOTY STREET
SUITE 701

City MADISON State WI Zip Code 53703-3391

FEC ID number of contributing federal political committee. **C** C00545194

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5200.00

Date of Receipt
09 / 08 / 2016
Transaction ID : SA11C.390037

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. SIERRA NEVADA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 50193

City SPARKS State NV Zip Code 89435-0193

FEC ID number of contributing federal political committee. **C** C00367995

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
08 / 09 / 2016
Transaction ID : SA11C.363942

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. SIERRA NEVADA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 50193

City SPARKS State NV Zip Code 89435-0193

FEC ID number of contributing federal political committee. **C** C00367995

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
08 / 17 / 2016
Transaction ID : SA11C.367450

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5585 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SINCLAIR BROADCAST GROUP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10706 BEAVER DAM ROAD
City HUNT VALLEY State MD Zip Code 21030-2207
FEC ID number of contributing federal political committee. **C** C00562660
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 08 / 2016**
Transaction ID : SA11C.390038
Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

B. SOLARCITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 13TH ST. NW SUITE 900N
City WASHINGTON State DC Zip Code 20005-3807
FEC ID number of contributing federal political committee. **C** C00520569
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **07 / 12 / 2016**
Transaction ID : SA11C.346038
Amount of Each Receipt this Period 2700.00
 Memo Item
CONTRIBUTION

C. T-MOBILE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 401 9TH STREET NW SUITE 550
City WASHINGTON State DC Zip Code 20004-2141
FEC ID number of contributing federal political committee. **C** C00361758
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 15 / 2016**
Transaction ID : SA11C.395191
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5586 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TDS TELECOM PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 5158

City MADISON	State WI	Zip Code 53705-0158
FEC ID number of contributing federal political committee. C C00299750		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5200.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2016
Transaction ID : SA11C.371555

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. THE TIMKEN COMPANY GOOD GOVERNMENT FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4500 MT. PLEASANT ST NW

City NORTH CANTON	State OH	Zip Code 44720-5450
FEC ID number of contributing federal political committee. C C00311308		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016
Transaction ID : SA11C.402079

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. TIME WARNER INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 800 CONNECTICUT AVE., NW
SUITE 1200

City WASHINGTON	State DC	Zip Code 20006-2736
FEC ID number of contributing federal political committee. C C00339291		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2016
Transaction ID : SA11C.358858

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5587 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. TRANSPAC		Date of Receipt
Mailing Address 3101 PACKERLAND DRIVE		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City GREEN BAY	State WI	Zip Code 54313-6187
FEC ID number of contributing federal political committee. C C00563924		Transaction ID : SA11C.420472
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TROUTMAN SANDERS LLP PAC		Date of Receipt
Mailing Address 600 PEACHTREE ST. STE. 5200		<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
City ATLANTA	State GA	Zip Code 30308-2231
FEC ID number of contributing federal political committee. C C00311142		Transaction ID : SA11C.346475
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. TURKISH COALITION USA PAC		Date of Receipt
Mailing Address 1025 CONNECTICUT AVE SUITE 1000		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20036-5417
FEC ID number of contributing federal political committee. C C00432526		Transaction ID : SA11C.367866
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="8500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5588 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UGI CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX

City READING	State PA	Zip Code 19612-
FEC ID number of contributing federal political committee. C C00139667		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2016
Transaction ID : SA11C.356685

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

B. UNITED AIRLINES POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 66100

City CHICAGO	State IL	Zip Code 60666-0100
FEC ID number of contributing federal political committee. C C00078261		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016
Transaction ID : SA11C.420480

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. UNITED HEALTH SERVICES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 1210

City TOCCOA	State GA	Zip Code 30577-1421
FEC ID number of contributing federal political committee. C C00400135		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016
Transaction ID : SA11C.420471

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5589 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UPSPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2016
Transaction ID : SA11C.356840

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. VAIL RESORTS EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 390 INTERLOCKEN CRESCENT

City BROOMFIELD	State CO	Zip Code 80021-8038
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00580894

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016
Transaction ID : SA11C.390039

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. VIZIENT, INC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 799 9TH STREET, N.W.
SUITE 210

City WASHINGTON	State DC	Zip Code 20001-5325
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FEC ID number of contributing federal political committee. **C** C00199497

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2016
Transaction ID : SA11C.354422

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5590 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WENDY'S COMPANY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 15441

City WASHINGTON	State DC	Zip Code 20003-0441
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00369090

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2016

Transaction ID : SA11C.367362

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. WESTERN ENERGY ALLIANCE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 SHERMAN ST
SUITE 2700

City DENVER	State CO	Zip Code 80203-4351
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00426569

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : SA11C.385406

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WESTROCK PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 504 THRASHER STREET

City NORCROSS	State GA	Zip Code 30071-1967
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00117424

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11C.396549

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5591 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEYERHAEUSER PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 9777

City FEDERAL WAY	State WA	Zip Code 98063-9777
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2016

Transaction ID : SA11C.367863

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	824950.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5592 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RYAN FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1488

City JANESVILLE	State WI	Zip Code 53547
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
51910.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

Transaction ID : SA12.15311

Amount of Each Receipt this Period
19060.64

Memo Item
TRANSFER OF EXCESS DISTRIBUTION

B. NRCC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 FIRST STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002931

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
501100.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA12.15025

Amount of Each Receipt this Period
195011.77

Memo Item
TRANSFER OF EXCESS DISTRIBUTION (NRCC BU)

C. NRCC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 FIRST STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002931

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
501100.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2016

Transaction ID : SA12.15026

Amount of Each Receipt this Period
12173.00

Memo Item
TRANSFER OF EXCESS DISTRIBUTION (NRCC LE)

SUBTOTAL of Receipts This Page (optional).....	226245.41
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5593 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. NRCC		Date of Receipt
Mailing Address 320 FIRST STREET SE		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City	State	Zip Code
WASHINGTON	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID : SA12.15338
C C00002931		Amount of Each Receipt this Period
		<input type="text"/> 293915.49
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		TRANSFER OF EXCESS DISTRIBUTION (NRCC BU
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	<input type="text"/> 501100.26	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.		Date of Receipt
Mailing Address		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
C		<input type="text"/>
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	<input type="text"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt
Mailing Address		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
C		<input type="text"/>
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify)	<input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text"/> 293915.49
TOTAL This Period (last page this line number only).....	<input type="text"/> 520160.90

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5594 OF 5722
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, CALEB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1860 CARPENTER RD

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2711.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Transaction ID : SA15.14946

Amount of Each Receipt this Period
2174.94

Memo Item
REFUND

B. SMITH, CALEB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1860 CARPENTER RD

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2711.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Transaction ID : SA15.14947

Amount of Each Receipt this Period
536.08

Memo Item
REFUND

C. EAJ MANAGER LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1309 5TH ST NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SA15.15073

Amount of Each Receipt this Period
2000.00

Memo Item
REFUND

SUBTOTAL of Receipts This Page (optional).....	4711.02
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 5595 OF 5722
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1109.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SA15.15147

Amount of Each Receipt this Period
172.62

Memo Item
REFUND

B. TARGETED VICTORY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1109.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2016

Transaction ID : SA15.15377

Amount of Each Receipt this Period
17.26

Memo Item
REFUND

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	189.88
TOTAL This Period (last page this line number only).....	4900.90

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. BRAUER, STEPHEN, , ,

Mailing Address 11250 HUNTER DR

City
BRIDGETON

State
MO

Zip Code
63044-2306

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.39390

Amount of Each Disbursement this Period

2500.00

Memo Item JFC EVENT ENTERTAINMENT & SUPPLIES

Full Name (Last, First, Middle Initial)

B. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I15057

Amount of Each Disbursement this Period

1380.74

Memo Item

Full Name (Last, First, Middle Initial)

C. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	6

FEC Identification Number

C

Transaction ID : SB21B.I1516

Amount of Each Disbursement this Period

1380.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5261.48

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1539'
Amount of Each Disbursement this Period
[REDACTED] 1380.74

Memo Item

Full Name (Last, First, Middle Initial)

B. DAY, VANESSA, , ,

Mailing Address 1325 18TH STREET NW
APT. 304

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I15635
Amount of Each Disbursement this Period
[REDACTED] 1380.75

Memo Item

Full Name (Last, First, Middle Initial)

C. DIESEL, MARIA, , ,

Mailing Address 1533 JOHNNYS WAY

City
WEST CHESTER

State
PA

Zip Code
19382

Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	6		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1462
Amount of Each Disbursement this Period
[REDACTED] 259.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3	0	2	0	.	9	7
---	---	---	---	---	---	---

3	0	2	0	.	9	7
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DIESEL, MARIA, , ,

Mailing Address 1533 JOHNNYS WAY

City
WEST CHESTER

State
PA

Zip Code
19382

Purpose of Disbursement
JFC MILEAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1462!
Amount of Each Disbursement this Period
[] 56.00 []

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 500 STAPLES DR

City
FRAMINGHAM

State
MA

Zip Code
17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1462!
Amount of Each Disbursement this Period
[] 113.38 []

Memo Item

Full Name (Last, First, Middle Initial)

C. DIESEL, MARIA, , ,

Mailing Address 1533 JOHNNYS WAY

City
WEST CHESTER

State
PA

Zip Code
19382

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1468
Amount of Each Disbursement this Period
[] 7500.00 []

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7	5	0	0	.	0	0
---	---	---	---	---	---	---

7	5	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. **DIVINCENTIS, ELIZABETH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2020 12TH ST NW #808

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 14 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.I1480!**

Amount of Each Disbursement this Period: 139.96

Memo Item

B. **DIVINCENTIS, ELIZABETH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2020 12TH ST NW #808

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.I14873**

Amount of Each Disbursement this Period: 139.96

Memo Item

C. **DIVINCENTIS, ELIZABETH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2020 12TH ST NW #808

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.I1505**

Amount of Each Disbursement this Period: 139.96

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 419.88

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. DIVINCENTIS, ELIZABETH, , ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 2020 12TH ST NW #808		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1516 Amount of Each Disbursement this Period [REDACTED] 139.96	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. DIVINCENTIS, ELIZABETH, , ,		Date of Disbursement MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 2020 12TH ST NW #808		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1539C Amount of Each Disbursement this Period [REDACTED] 3315.52	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. DIVINCENTIS, ELIZABETH, , ,		Date of Disbursement MM / DD / YYYY 09 / 27 / 2016	
Mailing Address 2020 12TH ST NW #808		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1556 Amount of Each Disbursement this Period [REDACTED] 23.11	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type
Purpose of Disbursement JFC TRAVEL EXPENSE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3478.59
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DIVINCENTIS, ELIZABETH, , ,

Mailing Address 2020 12TH ST NW #808

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1563I
Amount of Each Disbursement this Period
[] 139.96

Memo Item

Full Name (Last, First, Middle Initial)

B. GRIBBIN, BRIDGET, K, ,

Mailing Address 60 L ST NE APT. 1016

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1480I
Amount of Each Disbursement this Period
[] 355.66

Memo Item

Full Name (Last, First, Middle Initial)

C. GRIBBIN, BRIDGET, K, ,

Mailing Address 60 L ST NE APT. 1016

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1487I
Amount of Each Disbursement this Period
[] 355.67

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

8	5	1	.	2	9
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TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. GRIBBIN, BRIDGET, K, ,		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016	
Mailing Address 60 L ST NE APT. 1016		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1505! Amount of Each Disbursement this Period [REDACTED] 355.66	
City WASHINGTON	State DC	Zip Code 20002	Category/ Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. GRIBBIN, BRIDGET, K, ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 60 L ST NE APT. 1016		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1516! Amount of Each Disbursement this Period [REDACTED] 355.66	
City WASHINGTON	State DC	Zip Code 20002	Category/ Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. GRIBBIN, BRIDGET, K, ,		Date of Disbursement MM / DD / YYYY 09 / 15 / 2016	
Mailing Address 60 L ST NE APT. 1016		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1538 Amount of Each Disbursement this Period [REDACTED] 4981.01	
City WASHINGTON	State DC	Zip Code 20002	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 5692.33
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. GRIBBIN, BRIDGET, K, ,

Mailing Address 60 L ST NE APT. 1016

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	6

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1563;
Amount of Each Disbursement this Period
[Redacted] 355.67

Memo Item

Full Name (Last, First, Middle Initial)

B. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	6

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1480;
Amount of Each Disbursement this Period
[Redacted] 870.51

Memo Item

Full Name (Last, First, Middle Initial)

C. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I1487
Amount of Each Disbursement this Period
[Redacted] 870.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2	0	9	6	.	7	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1506I Amount of Each Disbursement this Period [REDACTED] 870.51	
City ALEXANDRIA	State VA	Zip Code 22301	Category/Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1516I Amount of Each Disbursement this Period [REDACTED] 870.51	
City ALEXANDRIA	State VA	Zip Code 22301	Category/Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. HAMEL, LAUREN, G., ,		Date of Disbursement MM / DD / YYYY 09 / 09 / 2016	
Mailing Address 2425 KING ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1534I Amount of Each Disbursement this Period [REDACTED] 268.88	
City ALEXANDRIA	State VA	Zip Code 22301	Category/Type 001
Purpose of Disbursement JFC TRAVEL EXPENSES (NO ITEMIZATION)		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2009.90
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1538f

Amount of Each Disbursement this Period

[REDACTED] 6998.40

Memo Item

Full Name (Last, First, Middle Initial)

B. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1563f

Amount of Each Disbursement this Period

[REDACTED] 870.52

Memo Item

Full Name (Last, First, Middle Initial)

C. HOWARD, LAURA, J., ,

Mailing Address 1825 NEW HAMPSHIRE AVE NW #404

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1480

Amount of Each Disbursement this Period

[REDACTED] 335.83

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 8204.75

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. **HOWARD, LAURA, J, ,**
 Full Name (Last, First, Middle Initial)
 Mailing Address 1825 NEW HAMPSHIRE AVE NW #404
 City WASHINGTON State DC Zip Code 20006
 Purpose of Disbursement JFC SALARY
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 07 / 29 / 2016
 FEC Identification Number C
Transaction ID : SB21B.I1487I
 Amount of Each Disbursement this Period 335.84
 Memo Item

B. **HOWARD, LAURA, J, ,**
 Full Name (Last, First, Middle Initial)
 Mailing Address 1825 NEW HAMPSHIRE AVE NW #404
 City WASHINGTON State DC Zip Code 20006
 Purpose of Disbursement JFC SALARY
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 08 / 15 / 2016
 FEC Identification Number C
Transaction ID : SB21B.I1506I
 Amount of Each Disbursement this Period 335.83
 Memo Item

C. **HOWARD, LAURA, J, ,**
 Full Name (Last, First, Middle Initial)
 Mailing Address 1825 NEW HAMPSHIRE AVE NW #404
 City WASHINGTON State DC Zip Code 20006
 Purpose of Disbursement JFC SALARY
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:
 Date of Disbursement 08 / 31 / 2016
 FEC Identification Number C
Transaction ID : SB21B.I1516I
 Amount of Each Disbursement this Period 335.83
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1007.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HOWARD, LAURA, J, ,

Mailing Address 1825 NEW HAMPSHIRE AVE NW #404

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1538
Amount of Each Disbursement this Period
[REDACTED] 4907.65

Memo Item

Full Name (Last, First, Middle Initial)

B. HOWARD, LAURA, J, ,

Mailing Address 1825 NEW HAMPSHIRE AVE NW #404

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
JFC TRAVEL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1556
Amount of Each Disbursement this Period
[REDACTED] 142.79

Memo Item

Full Name (Last, First, Middle Initial)

C. HOWARD, LAURA, J, ,

Mailing Address 1825 NEW HAMPSHIRE AVE NW #404

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1563
Amount of Each Disbursement this Period
[REDACTED] 335.84

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	5386.28
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[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1480!
Amount of Each Disbursement this Period
524.80

Memo Item

Full Name (Last, First, Middle Initial)

B. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 29 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I14877
Amount of Each Disbursement this Period
524.79

Memo Item

Full Name (Last, First, Middle Initial)

C. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1506
Amount of Each Disbursement this Period
524.79

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

1574.38

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1516I
Amount of Each Disbursement this Period
[REDACTED] 524.80

Memo Item

Full Name (Last, First, Middle Initial)

B. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1538I
Amount of Each Disbursement this Period
[REDACTED] 6182.80

Memo Item

Full Name (Last, First, Middle Initial)

C. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1564I
Amount of Each Disbursement this Period
[REDACTED] 524.79

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	7232.39
------------	---------

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. MCDONALD, OLIVIA, M, ,		Date of Disbursement MM / DD / YYYY 07 / 14 / 2016	
Mailing Address 1407 CORCORAN ST NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1481I Amount of Each Disbursement this Period [REDACTED] 355.66	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MCDONALD, OLIVIA, M, ,		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 1407 CORCORAN ST NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1487I Amount of Each Disbursement this Period [REDACTED] 355.67	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MCDONALD, OLIVIA, M, ,		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016	
Mailing Address 1407 CORCORAN ST NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1506 Amount of Each Disbursement this Period [REDACTED] 355.66	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type 001
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1066.99
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCDONALD, OLIVIA, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1407 CORCORAN ST NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1516

Amount of Each Disbursement this Period: 355.66

Memo Item

B. MCDONALD, OLIVIA, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1407 CORCORAN ST NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1538

Amount of Each Disbursement this Period: 4981.01

Memo Item

C. MCDONALD, OLIVIA, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1407 CORCORAN ST NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1564

Amount of Each Disbursement this Period: 355.67

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5692.34

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1481'
Amount of Each Disbursement this Period

[REDACTED] 107.30

Memo Item

Full Name (Last, First, Middle Initial)

B. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1487'
Amount of Each Disbursement this Period

[REDACTED] 107.31

Memo Item

Full Name (Last, First, Middle Initial)

C. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1506
Amount of Each Disbursement this Period

[REDACTED] 107.31

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 321.92

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15171

Amount of Each Disbursement this Period

[REDACTED] 107.31

Memo Item

Full Name (Last, First, Middle Initial)

B. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
SEE MEMO ENTRY BELOW

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15174

Amount of Each Disbursement this Period

[REDACTED] 388.45

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR.

City
DALLAS

State
TX

Zip Code
75235

Purpose of Disbursement
JFC AIRFARE

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1517

Amount of Each Disbursement this Period

[REDACTED] 161.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 495.76

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1538
Amount of Each Disbursement this Period
3282.86

Memo Item

Full Name (Last, First, Middle Initial)

B. MERRICK, DAVID, , ,

Mailing Address 1819 E CAPITOL ST SE APT 301

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1564
Amount of Each Disbursement this Period
107.31

Memo Item

Full Name (Last, First, Middle Initial)

C. RODAY, ZACK, M, ,

Mailing Address 536 COLECRAFT CT

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC SALARY

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1481
Amount of Each Disbursement this Period
368.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3758.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. RODAY, ZACK, M, ,		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 536 COLECRAFT CT			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement JFC SALARY		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : SB21B.I1488I Amount of Each Disbursement this Period 368.74
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. RODAY, ZACK, M, ,		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016	
Mailing Address 536 COLECRAFT CT			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement JFC SALARY		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : SB21B.I1506I Amount of Each Disbursement this Period 368.74
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. RODAY, ZACK, M, ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 536 COLECRAFT CT			
City ALEXANDRIA	State VA	Zip Code 22314	
Purpose of Disbursement JFC SALARY		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : SB21B.I1517I Amount of Each Disbursement this Period 368.76
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1106.24
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RODAY, ZACK, M, ,

Mailing Address 536 COLECRAFT CT

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1538:
Amount of Each Disbursement this Period
[REDACTED] 5246.48

Memo Item

Full Name (Last, First, Middle Initial)

B. RODAY, ZACK, M, ,

Mailing Address 536 COLECRAFT CT

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1564:
Amount of Each Disbursement this Period
[REDACTED] 368.74

Memo Item

Full Name (Last, First, Middle Initial)

C. SAMSON, LEE, , ,

Mailing Address 9200 W SUNSET 7TH FLOOR

City
WEST HOLLYWOOD

State
CA

Zip Code
90069-3601

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	6		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.3549:
Amount of Each Disbursement this Period
[REDACTED] 11610.45

Memo Item JFC EVENT CATERING AND RENTALS

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	1	7	2	2	5	.	6	7
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[REDACTED]	[REDACTED]
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1481

Amount of Each Disbursement this Period

4	5	7	.	9	9
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I14881

Amount of Each Disbursement this Period

4	5	7	.	9	8
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1506

Amount of Each Disbursement this Period

4	5	7	.	9	8
---	---	---	---	---	---

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	3	7	.	3	9	5
---	---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

1	3	7	.	3	9	5
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1517
Amount of Each Disbursement this Period
457.99

Memo Item

Full Name (Last, First, Middle Initial)

B. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I15382
Amount of Each Disbursement this Period
6247.20

Memo Item

Full Name (Last, First, Middle Initial)

C. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1564
Amount of Each Disbursement this Period
457.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7163.17

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1474!

Amount of Each Disbursement this Period

[REDACTED] 87.98

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC SALARY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I14814

Amount of Each Disbursement this Period

[REDACTED] 883.18

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1483

Amount of Each Disbursement this Period

[REDACTED] 101.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 1073.14

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1488
Amount of Each Disbursement this Period

[REDACTED] 883.16

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15024
Amount of Each Disbursement this Period

[REDACTED] 87.98

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1506
Amount of Each Disbursement this Period

[REDACTED] 1487.02

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 2458.16

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1512
Amount of Each Disbursement this Period

[REDACTED] 104.18

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15162
Amount of Each Disbursement this Period

[REDACTED] 1483.35

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1533
Amount of Each Disbursement this Period

[REDACTED] 90.18

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 1677.71

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1538'

Amount of Each Disbursement this Period

[REDACTED] 32987.45

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1541f

Amount of Each Disbursement this Period

[REDACTED] 110.03

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1564

Amount of Each Disbursement this Period

[REDACTED] 1481.34

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 34578.82

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1566'
Amount of Each Disbursement this Period
14.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I14618
Amount of Each Disbursement this Period
8.10

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1471
Amount of Each Disbursement this Period
97.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

119.90

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I14711

Amount of Each Disbursement this Period

1018.85

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I14711

Amount of Each Disbursement this Period

5.47

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.I1480

Amount of Each Disbursement this Period

585.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1610.22

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	2		2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I14811

Amount of Each Disbursement this Period

[REDACTED] 1975.66

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	3		2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I14817

Amount of Each Disbursement this Period

[REDACTED] 15.05

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	4		2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1481

Amount of Each Disbursement this Period

[REDACTED] 34.78

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 2025.49

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	15	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1482

Amount of Each Disbursement this Period

[REDACTED]	8843.45
------------	---------

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	18	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1482

Amount of Each Disbursement this Period

[REDACTED]	370.63
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	19	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1482

Amount of Each Disbursement this Period

[REDACTED]	879.28
------------	--------

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	10093.36
------------	----------

[REDACTED]	
------------	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I14831
Amount of Each Disbursement this Period
1290.75

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 21 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I14831
Amount of Each Disbursement this Period
61.63

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1484
Amount of Each Disbursement this Period
4015.84

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5368.22

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 25 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I14851

Amount of Each Disbursement this Period

[REDACTED] 357.90

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 26 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I14851

Amount of Each Disbursement this Period

[REDACTED] 1092.98

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 27 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1486

Amount of Each Disbursement this Period

[REDACTED] 25.57

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 1476.45

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1488

Amount of Each Disbursement this Period: 113.84

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1494

Amount of Each Disbursement this Period: 3457.62

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1494

Amount of Each Disbursement this Period: 81.76

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3653.22

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1498!

Amount of Each Disbursement this Period: 1289.76

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1499!

Amount of Each Disbursement this Period: 3959.25

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1503

Amount of Each Disbursement this Period: 4095.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9344.61

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1503'
Amount of Each Disbursement this Period

[REDACTED] 438.26

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1503'
Amount of Each Disbursement this Period

[REDACTED] 1904.55

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1505'
Amount of Each Disbursement this Period

[REDACTED] 1032.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 3375.11

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1505!

Amount of Each Disbursement this Period

[REDACTED] 588.69

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1506!

Amount of Each Disbursement this Period

[REDACTED] 216.96

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1507

Amount of Each Disbursement this Period

[REDACTED] 93.87

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 899.52

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1508:
Amount of Each Disbursement this Period
530.09

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1512C
Amount of Each Disbursement this Period
6752.10

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1512
Amount of Each Disbursement this Period
79.29

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7361.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2016

FEC Identification Number

C

Transaction ID : SB21B.I1512I

Amount of Each Disbursement this Period

2164.96

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2016

FEC Identification Number

C

Transaction ID : SB21B.I1513C

Amount of Each Disbursement this Period

1053.88

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2016

FEC Identification Number

C

Transaction ID : SB21B.I1513I

Amount of Each Disbursement this Period

3504.46

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

6723.30

TOTAL This Period (last page this line number only)..... ▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1514

Amount of Each Disbursement this Period: 488.99

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1514

Amount of Each Disbursement this Period: 2261.51

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1520

Amount of Each Disbursement this Period: 800.16

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3550.66

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				3	1				2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1522'

Amount of Each Disbursement this Period

[REDACTED]	96.76
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	2				2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1528C

Amount of Each Disbursement this Period

[REDACTED]	488.10
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	7				2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1528

Amount of Each Disbursement this Period

[REDACTED]	1817.89
------------	---------

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	2402.75
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[REDACTED]	
------------	--

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1533i

Amount of Each Disbursement this Period

[REDACTED] 1035.25

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1534i

Amount of Each Disbursement this Period

[REDACTED] 1293.77

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1536

Amount of Each Disbursement this Period

[REDACTED] 390.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 2719.32

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 12 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1536

Amount of Each Disbursement this Period: 1219.50

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1538C

Amount of Each Disbursement this Period: 374.15

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 14 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1539

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1608.65

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1539

Amount of Each Disbursement this Period

[REDACTED] 233.98

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1545

Amount of Each Disbursement this Period

[REDACTED] 625.50

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1545

Amount of Each Disbursement this Period

[REDACTED] 573.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 1432.92

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1545!

Amount of Each Disbursement this Period

3	7	6	.	8	7
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15474

Amount of Each Disbursement this Period

1	0	2	7	.	5	2
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1555

Amount of Each Disbursement this Period

3	1	3	3	.	8	1
---	---	---	---	---	---	---

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4	5	3	8	.	2	0
---	---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

4	5	3	8	.	2	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. ANEDOT

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 09 / 22 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1555

Amount of Each Disbursement this Period: 40.77

Memo Item

Full Name (Last, First, Middle Initial)
B. ANEDOT

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: 001

Date of Disbursement: 09 / 24 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1557

Amount of Each Disbursement this Period: 97.80

Memo Item

Full Name (Last, First, Middle Initial)
C. ANEDOT

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 09 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1557

Amount of Each Disbursement this Period: 267.07

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 405.64

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	7		2	0	1	6		

FEC Identification Number

C []

Transaction ID : SB21B.I1557I

Amount of Each Disbursement this Period

[] 3900.30

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				3	0		2	0	1	6		

FEC Identification Number

C []

Transaction ID : SB21B.I1565I

Amount of Each Disbursement this Period

[] 726.79

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				3	0		2	0	1	6		

FEC Identification Number

C []

Transaction ID : SB21B.I1565I

Amount of Each Disbursement this Period

[] 1027.43

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 5654.52

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 3RD STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1566 Amount of Each Disbursement this Period 22.65
City BATON ROUGE	State LA	Zip Code 70801
Purpose of Disbursement JFC CC TRANSACTION FEES		001 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. ASPECT CONSULTING		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016
Mailing Address 8401 EXCELSIOR DR STE 103		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1484 Amount of Each Disbursement this Period 3397.14
City MADISON	State WI	Zip Code 53717
Purpose of Disbursement JFC DIRECT MAIL CAGING		003 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. ASPECT CONSULTING		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016
Mailing Address 8401 EXCELSIOR DR STE 103		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1504 Amount of Each Disbursement this Period 2749.12
City MADISON	State WI	Zip Code 53717
Purpose of Disbursement JFC DIRECT MAIL CAGING		001 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶

6168.91

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ASPECT CONSULTING

Mailing Address 8401 EXCELSIOR DR STE 103

City
MADISON

State
WI

Zip Code
53717

Purpose of Disbursement
JFC DIRECT MAIL CAGING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1528:
Amount of Each Disbursement this Period

11225.40

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I14611
Amount of Each Disbursement this Period

75000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1485
Amount of Each Disbursement this Period

75000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

161225.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1525I

Amount of Each Disbursement this Period

[REDACTED] 136141.01

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1558I

Amount of Each Disbursement this Period

[REDACTED] 269100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1482I

Amount of Each Disbursement this Period

[REDACTED] 154250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 559491.01

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
JFC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 07 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1474:
Amount of Each Disbursement this Period
659.14

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
JFC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 03 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1498:
Amount of Each Disbursement this Period
874.20

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
JFC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 13 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1536
Amount of Each Disbursement this Period
1140.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2673.82

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CONSERVATIVE CONNECTOR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		20		2016

Mailing Address PO BOX 952

FEC Identification Number

C []
Transaction ID : SB21B.I1482
 Amount of Each Disbursement this Period
 [] 116740.00

City GRANDVILLE State MI Zip Code 49468

Purpose of Disbursement
JFC LIST ACQUISITION

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B. CONSERVATIVE CONNECTOR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2016

Mailing Address PO BOX 952

FEC Identification Number

C []
Transaction ID : SB21B.I15312
 Amount of Each Disbursement this Period
 [] 297477.50

City GRANDVILLE State MI Zip Code 49468

Purpose of Disbursement
JFC LIST ACQUISITION

[001]
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C. CONSERVATIVE CONNECTOR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address PO BOX 952

FEC Identification Number

C []
Transaction ID : SB21B.I1564
 Amount of Each Disbursement this Period
 [] 83440.00

City GRANDVILLE State MI Zip Code 49468

Purpose of Disbursement
JFC LIST RENTAL

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 497657.50
 []

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DURABLE SAFETY PRODUCTS

Mailing Address 455 SPECIALITY PT

City
SANFORD

State
FL

Zip Code
32771

Purpose of Disbursement
JFC BRANDED APPAREL

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 07 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1462I

Amount of Each Disbursement this Period

[REDACTED] 19800.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DURABLE SAFETY PRODUCTS

Mailing Address 455 SPECIALITY PT

City
SANFORD

State
FL

Zip Code
32771

Purpose of Disbursement
JFC BRANDED APPAREL

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 25 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1484I

Amount of Each Disbursement this Period

[REDACTED] 1116.75

Memo Item

Full Name (Last, First, Middle Initial)

C. DURABLE SAFETY PRODUCTS

Mailing Address 455 SPECIALITY PT

City
SANFORD

State
FL

Zip Code
32771

Purpose of Disbursement
JFC BRANDED APPAREL

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 12 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1505I

Amount of Each Disbursement this Period

[REDACTED] 2350.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 23267.08

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DURABLE SAFETY PRODUCTS

Mailing Address 455 SPECIALITY PT

City
SANFORD

State
FL

Zip Code
32771

Purpose of Disbursement
JFC BRANDED APPAREL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1511;
Amount of Each Disbursement this Period

[REDACTED] 2373.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DURABLE SAFETY PRODUCTS

Mailing Address 455 SPECIALITY PT

City
SANFORD

State
FL

Zip Code
32771

Purpose of Disbursement
JFC BRANDED APPAREL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15472
Amount of Each Disbursement this Period

[REDACTED] 161.25

Memo Item

Full Name (Last, First, Middle Initial)

C. HACHETTE BOOK GROUP

Mailing Address PO BOX 8828

City
BOSTON

State
MA

Zip Code
02114

Purpose of Disbursement
JFC DONOR GIFTS (ROYALTY EXCLUDED BOOKS)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1539
Amount of Each Disbursement this Period

[REDACTED] 598.15

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 3132.40

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HIGH IMPACT CREATIONS LLC

Mailing Address 1162 EDGEVIEW DRIVE

City
JANESVILLE

State
WI

Zip Code
53545-7820

Purpose of Disbursement
JFC EVENT PHOTOGRAPHY

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1535
Amount of Each Disbursement this Period
700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE
STE. 100

City
WARRENTON

State
VA

Zip Code
20186

Purpose of Disbursement
JFC LEGAL SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I14997
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE
STE. 100

City
WARRENTON

State
VA

Zip Code
20186

Purpose of Disbursement
JFC LEGAL SERVICES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1547
Amount of Each Disbursement this Period
5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

10700.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
JFC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 07 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1474;
Amount of Each Disbursement this Period

[REDACTED] 349.45

Memo Item

Full Name (Last, First, Middle Initial)

B. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
JFC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 03 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1499;
Amount of Each Disbursement this Period

[REDACTED] 287.55

Memo Item

Full Name (Last, First, Middle Initial)

C. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
JFC SOFTWARE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 07 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1528
Amount of Each Disbursement this Period

[REDACTED] 1038.38

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 1675.38

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MUSTARD SEED INTERACTIVE LLC

Mailing Address 435 E MAIN ST STE 250

City
GREENWOOD

State
IN

Zip Code
46143

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1531!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PREFERRED COMMUNICATIONS

Mailing Address 815 KING ST STE 209

City
ALEXANDRIA

State
VA

Zip Code
2231

Purpose of Disbursement
JFC LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I15647
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE. 101

City
ATHENS

State
GA

Zip Code
30605

Purpose of Disbursement
JFC COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1495
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE. 101

City
ATHENS

State
GA

Zip Code
30605

Purpose of Disbursement
JFC COMPLIANCE SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1517:
Amount of Each Disbursement this Period

[REDACTED] 4079.17

Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE. 101

City
ATHENS

State
GA

Zip Code
30605

Purpose of Disbursement
JFC COMPLIANCE SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15597:
Amount of Each Disbursement this Period

[REDACTED] 4146.73

Memo Item

Full Name (Last, First, Middle Initial)

C. RD MARKETING LLC

Mailing Address PO BOX 111012

City
MEMPHIS

State
TN

Zip Code
38111

Purpose of Disbursement
JFC LIST ACQUISITION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1531:
Amount of Each Disbursement this Period

[REDACTED] 14561.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 22786.90

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RED CURVE SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT ST 2ND FL

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1485

Amount of Each Disbursement this Period: 20408.33

Memo Item

B. RED CURVE SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT ST 2ND FL

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I15047

Amount of Each Disbursement this Period: 19750.00

Memo Item

C. RED CURVE SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT ST 2ND FL

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1557

Amount of Each Disbursement this Period: 31657.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 71815.33

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RIGHT COUNTRY LISTS

Mailing Address 117 N ST ASAPH ST

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1531
Amount of Each Disbursement this Period
259500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448

Purpose of Disbursement
JFC DIRECT MARKETING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I14612
Amount of Each Disbursement this Period
659286.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448

Purpose of Disbursement
JFC DIRECT MARKETING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

003
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1479
Amount of Each Disbursement this Period
117441.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1036227.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. SCM ASSOCIATES		Date of Disbursement MM / DD / YYYY 07 / 25 / 2016	
Mailing Address 1283 MAIN ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1484I Amount of Each Disbursement this Period [REDACTED] 18457.19	
City DUBLIN	State NH	Zip Code 34448	Category/Type 003
Purpose of Disbursement JFC DIRECT MARKETING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. SCM ASSOCIATES		Date of Disbursement MM / DD / YYYY 07 / 27 / 2016	
Mailing Address 1283 MAIN ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1485I Amount of Each Disbursement this Period [REDACTED] 285024.00	
City DUBLIN	State NH	Zip Code 34448	Category/Type 003
Purpose of Disbursement JFC DIRECT MARKETING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. SCM ASSOCIATES		Date of Disbursement MM / DD / YYYY 08 / 03 / 2016	
Mailing Address 1283 MAIN ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1499I Amount of Each Disbursement this Period [REDACTED] 7851.72	
City DUBLIN	State NH	Zip Code 34448	Category/Type 003
Purpose of Disbursement JFC DIRECT MARKETING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 311332.91
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448

Purpose of Disbursement
JFC DIRECT MARKETING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1504I

Amount of Each Disbursement this Period

[REDACTED] 35048.46

Memo Item

Full Name (Last, First, Middle Initial)

B. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448

Purpose of Disbursement
JFC DIRECT MARKETING

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1507C

Amount of Each Disbursement this Period

[REDACTED] 4587.08

Memo Item

Full Name (Last, First, Middle Initial)

C. SCM ASSOCIATES

Mailing Address 1283 MAIN ST

City
DUBLIN

State
NH

Zip Code
34448

Purpose of Disbursement
JFC DIRECT MARKETING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1508

Amount of Each Disbursement this Period

[REDACTED] 319456.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 359091.54

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1512I

Amount of Each Disbursement this Period: 13789.12

Memo Item

B. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I15284

Amount of Each Disbursement this Period: 402872.50

Memo Item

C. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1531

Amount of Each Disbursement this Period: 14868.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 431530.48

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1537I

Amount of Each Disbursement this Period: 5864.80

Memo Item

B. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1553C

Amount of Each Disbursement this Period: 40216.00

Memo Item

C. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 22 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1555

Amount of Each Disbursement this Period: 290515.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 336595.80

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC ADVANCE AND TRAVEL SERVICES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

001
Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1462'
Amount of Each Disbursement this Period
135120.09

Memo Item

Full Name (Last, First, Middle Initial)

B. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC TRAVEL & EVENT SERVICES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

002
Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1479f
Amount of Each Disbursement this Period
223318.53

Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC TRAVEL & ADVANCE SERVICES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

002
Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1499
Amount of Each Disbursement this Period
133000.27

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

491438.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC TRAVEL & EVENT SERVICES

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1511!
Amount of Each Disbursement this Period

[REDACTED] 159376.96

Memo Item

Full Name (Last, First, Middle Initial)

B. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC ADVANCE, EVENT & TRAVEL SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15257
Amount of Each Disbursement this Period

[REDACTED] 266426.46

Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC TRAVEL & EVENT SERVICES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1547
Amount of Each Disbursement this Period

[REDACTED] 59585.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 485389.37

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STRATEGIC ADVANCE SERVICES

Mailing Address 611 PENNSYLVANIA AVE SE #267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC ADVANCE, EVENT AND TRAVEL SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1557!
Amount of Each Disbursement this Period
31189.78

Memo Item

Full Name (Last, First, Middle Initial)

B. STUART & ASSOCIATES

Mailing Address 15919 INDUSTRIAL PARKWAY

City
CLEVELAND

State
OH

Zip Code
44135

Purpose of Disbursement
JFC BRANDED PROMOTIONAL ITEMS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I15313
Amount of Each Disbursement this Period
1162.31

Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1461
Amount of Each Disbursement this Period
12.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

313064.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. SUNTRUST BANK		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address P.O. BOX 4418		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1469f Amount of Each Disbursement this Period 8936.89
City ATLANTA	State GA	Zip Code 30302
Purpose of Disbursement SEE MEMO ENTRIES BELOW		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. ACE MAILING CORPORATION		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address 2757 16TH ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1469f Amount of Each Disbursement this Period 2599.18
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement JFC DIRECT MARKETING		[REDACTED] Category/ Type
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. BIRD OF PARADISE		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address 17775 MAIN ST STE M		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1469f Amount of Each Disbursement this Period 251.40
City IRVINE	State CA	Zip Code 92614
Purpose of Disbursement JFC EVENT SUPPLIES		[REDACTED] Category/ Type
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	8936.89
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CONGRESSIONAL LIQUORS

Mailing Address 404 1ST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003-1826

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	6

FEC Identification Number

C
Transaction ID : SB21B.I14693
Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CUSTOMINK

Mailing Address 2910 DISTRICT AVE

City
FAIRFAX

State
VA

Zip Code
22031

Purpose of Disbursement
JFC BRANDED APPAREL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	6

FEC Identification Number

C
Transaction ID : SB21B.I14693
Amount of Each Disbursement this Period

1176.45

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 S SHADY GROVE RD

City
MEMPHIS

State
TN

Zip Code
38120

Purpose of Disbursement
JFC SHIPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	6

FEC Identification Number

C
Transaction ID : SB21B.I1469
Amount of Each Disbursement this Period

1539.68

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HELEN OLIVIA FLOWERS

Mailing Address 128 N PITT ST

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1469!
Amount of Each Disbursement this Period
[] 355.10

Memo Item

Full Name (Last, First, Middle Initial)

B. MAIDS IN BLACK

Mailing Address 2607 DOUGLASS ROAD SE APT 202

City
WASHINGTON

State
DC

Zip Code
20020

Purpose of Disbursement
JFC OFFICE CLEANING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1469!
Amount of Each Disbursement this Period
[] 190.40

Memo Item

Full Name (Last, First, Middle Initial)

C. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City
ATLANTA

State
GA

Zip Code
30308

Purpose of Disbursement
JFC EMAIL BLAST

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1469!
Amount of Each Disbursement this Period
[] 75.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						0	.	0	0

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ROBERTSON'S FLOWERS & EVENTS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2016

Mailing Address 8501 GERMANTOWN AVE

FEC Identification Number

C

Transaction ID : SB21B.I1470I
Amount of Each Disbursement this Period

258.59

City PHILADELPHIA State PA Zip Code 19118

Purpose of Disbursement
JFC EVENT SUPPLIES

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2016

Mailing Address 500 STAPLES DR

FEC Identification Number

C

Transaction ID : SB21B.I1469I
Amount of Each Disbursement this Period

1236.17

City FRAMINGHAM State MA Zip Code 17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. VIDA FLORAL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2016

Mailing Address STUDIO

FEC Identification Number

C

Transaction ID : SB21B.I1470I
Amount of Each Disbursement this Period

225.99

City LONG BEACH State CA Zip Code 90803

Purpose of Disbursement
JFC EVENT SUPPLIES

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. SUNTRUST BANK			Date of Disbursement MM / DD / YYYY 07 / 07 / 2016	
Mailing Address P.O. BOX 4418			FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1474' Amount of Each Disbursement this Period [REDACTED] 38.00	
City ATLANTA	State GA	Zip Code 30302	Memo Item <input type="checkbox"/>	
Purpose of Disbursement JFC BANK FEE		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SUNTRUST BANK			Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address P.O. BOX 4418			FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1479# Amount of Each Disbursement this Period [REDACTED] 892.38	
City ATLANTA	State GA	Zip Code 30302	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SEE MEMO ENTRIES		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FEDEX			Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number C [REDACTED] Transaction ID : SB21B.I1480 Amount of Each Disbursement this Period [REDACTED] 21.57	
City MEMPHIS	State TN	Zip Code 38120	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement JFC SHIPPING		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 930.38
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MAIDS IN BLACK

Mailing Address 2607 DOUGLASS ROAD SE APT 202

City
WASHINGTON

State
DC

Zip Code
20020

Purpose of Disbursement
JFC OFFICE CLEANING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1480
Amount of Each Disbursement this Period
[REDACTED] 95.20

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 500 STAPLES DR

City
FRAMINGHAM

State
MA

Zip Code
17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1479
Amount of Each Disbursement this Period
[REDACTED] 102.33

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 441 2ND ST SW

City
WASHINGTON

State
DC

Zip Code
20515

Purpose of Disbursement
JFC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.I1480
Amount of Each Disbursement this Period
[REDACTED] 503.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	0.00
------------	------

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement
JFC BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 21 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1483
Amount of Each Disbursement this Period

281.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement
JFC BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 29 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I14941
Amount of Each Disbursement this Period

96.50

Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 02 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1494
Amount of Each Disbursement this Period

10050.09

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10427.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONGRESSIONAL LIQUORS

Full Name (Last, First, Middle Initial)
Mailing Address 404 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1826

Purpose of Disbursement JFC EVENT BEVERAGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1494!

Amount of Each Disbursement this Period: 25.33

Memo Item

B. FEDEX

Full Name (Last, First, Middle Initial)
Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement JFC SHIPPING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1495C

Amount of Each Disbursement this Period: 3269.64

Memo Item

C. HACHETTE BOOK GROUP

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 8828

City BOSTON State MA Zip Code 02114

Purpose of Disbursement JFC DONOR GIFTS (ROYALTY EXCLUDED BOOKS)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1495

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MAIDS IN BLACK

Mailing Address 2607 DOUGLASS ROAD SE APT 202

City
WASHINGTON

State
DC

Zip Code
20020

Purpose of Disbursement
JFC OFFICE CLEANING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1495
Amount of Each Disbursement this Period

[REDACTED] 260.40

Memo Item

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City
ATLANTA

State
GA

Zip Code
30308

Purpose of Disbursement
JFC EMAIL BLAST

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1495
Amount of Each Disbursement this Period

[REDACTED] 75.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 500 STAPLES DR

City
FRAMINGHAM

State
MA

Zip Code
17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1495
Amount of Each Disbursement this Period

[REDACTED] 826.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 0.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1507
Amount of Each Disbursement this Period
2745.60

Memo Item

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 410 TERRY AVE. N

City
SEATTLE

State
WA

Zip Code
98109

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1507
Amount of Each Disbursement this Period
177.68

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 S SHADY GROVE RD

City
MEMPHIS

State
TN

Zip Code
38120

Purpose of Disbursement
JFC SHPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1507
Amount of Each Disbursement this Period
541.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2745.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HACHETTE BOOK GROUP

Mailing Address PO BOX 8828

City
BOSTON

State
MA

Zip Code
02114

Purpose of Disbursement
JFC DONOR GIFTS (ROYALTY EXCLUDED BOOKS)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6					2016

FEC Identification Number

C []

Transaction ID : SB21B.I1507

Amount of Each Disbursement this Period

[] 1075.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MAIDS IN BLACK

Mailing Address 2607 DOUGLASS ROAD SE APT 202

City
WASHINGTON

State
DC

Zip Code
20020

Purpose of Disbursement
JFC OFFICE CLEANING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6					2016

FEC Identification Number

C []

Transaction ID : SB21B.I1507

Amount of Each Disbursement this Period

[] 95.20

Memo Item

Full Name (Last, First, Middle Initial)

C. PARTY INNOVATIONS

Mailing Address 306 2ND ST STE 3A

City
BROOKLYN

State
NY

Zip Code
11215

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6					2016

FEC Identification Number

C []

Transaction ID : SB21B.I1507

Amount of Each Disbursement this Period

[] 208.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 0.00

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DR

City
FRAMINGHAM

State
MA

Zip Code
17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1508I

Amount of Each Disbursement this Period

420.44

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 441 2ND ST SW

City
WASHINGTON

State
DC

Zip Code
20515

Purpose of Disbursement
JFC POSTAGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1508I

Amount of Each Disbursement this Period

40.30

Memo Item

Full Name (Last, First, Middle Initial)

C. WINSTON FLOWERS

Mailing Address 8 MAIN ST

City
HINGHAM

State
MA

Zip Code
02043

Purpose of Disbursement
JFC EVENT SUPPLIES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1508I

Amount of Each Disbursement this Period

174.38

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUNTRUST BANK

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement JFC BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1512'

Amount of Each Disbursement this Period: 158.25

Memo Item

B. SUNTRUST BANK

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement JFC BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1521'

Amount of Each Disbursement this Period: 149.50

Memo Item

C. SUNTRUST BANK

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement JFC BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1522'

Amount of Each Disbursement this Period: 12.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 320.25

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1528'

Amount of Each Disbursement this Period

[REDACTED] 12.50

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15365

Amount of Each Disbursement this Period

[REDACTED] 11832.52

Memo Item

Full Name (Last, First, Middle Initial)

C. AMAZON.COM

Mailing Address 410 TERRY AVE. N

City
SEATTLE

State
WA

Zip Code
98109

Purpose of Disbursement
JFC OFFICE SUPPLIES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1536

Amount of Each Disbursement this Period

[REDACTED] 160.82

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 11845.02

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL FRAME & PHOTO

Mailing Address 645 PENNSYLVANIA AVE SE STE 201

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC PHOTO PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1541!
Amount of Each Disbursement this Period
[] 572.40

Memo Item

Full Name (Last, First, Middle Initial)

B. CONGRESSIONAL LIQUORS

Mailing Address 404 1ST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003-1826

Purpose of Disbursement
JFC EVENT BEVERAGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1537z
Amount of Each Disbursement this Period
[] 56.19

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 S SHADY GROVE RD

City
MEMPHIS

State
TN

Zip Code
38120

Purpose of Disbursement
JFC PRINTING & SHIPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	6

FEC Identification Number

C []
Transaction ID : SB21B.I1536
Amount of Each Disbursement this Period
[] 4114.78

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[]	0.00
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[]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. GATHER ON BROADWAY

Mailing Address 139 N BROADWAY

City
GREEN BAY

State
WI

Zip Code
54303

Purpose of Disbursement
JFC EVENT CATERING & FACILITY FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1536f

Amount of Each Disbursement this Period

2087.25

Memo Item

Full Name (Last, First, Middle Initial)

B. JACKSON HOLE POP!

Mailing Address 1560 MARIN LANE STE C

City
JACKSON

State
WY

Zip Code
83001

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1537f

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LOTOS CLUB

Mailing Address 5 E 66TH ST

City
NEW YORK

State
NY

Zip Code
10065

Purpose of Disbursement
JFC EVENT CATERING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1536

Amount of Each Disbursement this Period

1931.77

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. MAIDS IN BLACK

Date of Disbursement: MM / DD / YYYY
09 / 13 / 2016

Mailing Address 2607 DOUGLASS ROAD SE APT 202

City WASHINGTON State DC Zip Code 20020

Purpose of Disbursement JFC OFFICE CLEANING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I15371
Amount of Each Disbursement this Period: 190.40

Memo Item

Full Name (Last, First, Middle Initial)
B. MAILCHIMP

Date of Disbursement: MM / DD / YYYY
09 / 13 / 2016

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement JFC EMAIL BLAST

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I15371
Amount of Each Disbursement this Period: 75.00

Memo Item

Full Name (Last, First, Middle Initial)
C. PERSEPHONE BAKERY

Date of Disbursement: MM / DD / YYYY
09 / 13 / 2016

Mailing Address 145 E BROADWAY

City JACKSON State WY Zip Code 83001

Purpose of Disbursement JFC EVENT CATERING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.I15371
Amount of Each Disbursement this Period: 940.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 500 STAPLES DR

City
FRAMINGHAM

State
MA

Zip Code
17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1537

Amount of Each Disbursement this Period

[REDACTED] 845.59

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 441 2ND ST SW

City
WASHINGTON

State
DC

Zip Code
20515

Purpose of Disbursement
JFC POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1537

Amount of Each Disbursement this Period

[REDACTED] 146.90

Memo Item

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1545

Amount of Each Disbursement this Period

[REDACTED] 9412.59

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 9412.59

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. AMAZON.COM

Date of Disbursement
MM / DD / YYYY
09 / 20 / 2016

Mailing Address 410 TERRY AVE. N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I1546f
Amount of Each Disbursement this Period
378.51

Memo Item

Full Name (Last, First, Middle Initial)
B. CAPITOL HILL FRAME & PHOTO

Date of Disbursement
MM / DD / YYYY
09 / 20 / 2016

Mailing Address 645 PENNSYLVANIA AVE SE STE 201

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC PHOTO PRINTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I1546f
Amount of Each Disbursement this Period
29.57

Memo Item

Full Name (Last, First, Middle Initial)
C. FEDEX

Date of Disbursement
MM / DD / YYYY
09 / 20 / 2016

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement JFC PRINTING & SHIPPING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I1546f
Amount of Each Disbursement this Period
2010.43

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. HACHETTE BOOK GROUP

Mailing Address PO BOX 8828

City BOSTON State MA Zip Code 02114

Purpose of Disbursement JFC DONOR GIFTS (ROYALTY EXCLUDED BOOKS)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1546

Amount of Each Disbursement this Period: 5400.00

Memo Item

Full Name (Last, First, Middle Initial)
B. KIKO'S FLOWER & GIFTS

Mailing Address 650 BUSSE HWY

City PARK RIDGE State IL Zip Code 60068

Purpose of Disbursement JFC EVENT SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1546

Amount of Each Disbursement this Period: 206.28

Memo Item

Full Name (Last, First, Middle Initial)
C. MAIDS IN BLACK

Mailing Address 2607 DOUGLASS ROAD SE APT 202

City WASHINGTON State DC Zip Code 20020

Purpose of Disbursement JFC OFFICE CLEANING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1546

Amount of Each Disbursement this Period: 119.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MAILCHIMP

Full Name (Last, First, Middle Initial)

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement JFC EMAIL BLAST

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1546!

Amount of Each Disbursement this Period: 75.00

Memo Item

B. STAPLES

Full Name (Last, First, Middle Initial)

Mailing Address 500 STAPLES DR

City FRAMINGHAM State MA Zip Code 17024

Purpose of Disbursement JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1546!

Amount of Each Disbursement this Period: 347.76

Memo Item

C. WALMART

Full Name (Last, First, Middle Initial)

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement JFC PHOTO PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1546!

Amount of Each Disbursement this Period: 606.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUNTRUST BANK

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement JFC BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1553!

Amount of Each Disbursement this Period: 255.90

Memo Item

B. SUNTRUST BANK

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I15627

Amount of Each Disbursement this Period: 9679.25

Memo Item

C. ACCURATE WORD LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4481 WHITE PLAINS LN

City WHITE PLAINS State MD Zip Code 20695

Purpose of Disbursement JFC PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B.I1562

Amount of Each Disbursement this Period: 876.65

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9935.15

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL FRAME & PHOTO

Mailing Address 645 PENNSYLVANIA AVE SE STE 201

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1563I
Amount of Each Disbursement this Period
23.15

Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 S SHADY GROVE RD

City
MEMPHIS

State
TN

Zip Code
38120

Purpose of Disbursement
JFC PRINTING & SHIPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1562I
Amount of Each Disbursement this Period
6823.65

Memo Item

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 500 STAPLES DR

City
FRAMINGHAM

State
MA

Zip Code
17024

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1563I
Amount of Each Disbursement this Period
1036.45

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 441 2ND ST SW

City
WASHINGTON

State
DC

Zip Code
20515

Purpose of Disbursement
JFC POSTAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1563
 Amount of Each Disbursement this Period
 [] 265.74

Memo Item

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 702 SW 8TH ST

City
BENTONVILLE

State
AR

Zip Code
72716

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1563
 Amount of Each Disbursement this Period
 [] 283.03

Memo Item

Full Name (Last, First, Middle Initial)

C. WINSTON FLOWERS

Mailing Address 8 MAIN ST

City
HINGHAM

State
MA

Zip Code
02043

Purpose of Disbursement
JFC EVENT SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

C []
Transaction ID : SB21B.I1563
 Amount of Each Disbursement this Period
 [] 297.78

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[]	0.00
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[]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1566
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I14602
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1461
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1465
Amount of Each Disbursement this Period

[REDACTED] 3763.99

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1474
Amount of Each Disbursement this Period

[REDACTED] 224.45

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1474
Amount of Each Disbursement this Period

[REDACTED] 578.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 4567.38

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 11 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1474
Amount of Each Disbursement this Period
370.63

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 12 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1474
Amount of Each Disbursement this Period
178.51

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 14 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1480
Amount of Each Disbursement this Period
368.89

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

918.03

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1481!
Amount of Each Disbursement this Period

116.12

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC DIGITAL CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 20 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1482!
Amount of Each Disbursement this Period

106590.52

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 13 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1482
Amount of Each Disbursement this Period

4247.83

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

110954.47

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1482I
Amount of Each Disbursement this Period
867.80

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 19 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1483I
Amount of Each Disbursement this Period
561.86

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1483I
Amount of Each Disbursement this Period
3635.38

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5065.04

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 21 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1483
Amount of Each Disbursement this Period

[REDACTED] 4324.82

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1483
Amount of Each Disbursement this Period

[REDACTED] 5597.36

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 25 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1484
Amount of Each Disbursement this Period

[REDACTED] 4041.01

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 13963.19

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	6						2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1484!

Amount of Each Disbursement this Period

[REDACTED] 3686.47

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	7						2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1485!

Amount of Each Disbursement this Period

[REDACTED] 2067.74

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	8						2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1486

Amount of Each Disbursement this Period

[REDACTED] 2186.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 7940.71

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1488
Amount of Each Disbursement this Period

1686.36

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1494
Amount of Each Disbursement this Period

3605.75

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 02 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1494
Amount of Each Disbursement this Period

3399.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8691.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC CC TRANSACTION FEES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 03 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I1499
Amount of Each Disbursement this Period: 6354.30

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC CC TRANSACTION FEES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 04 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I1499
Amount of Each Disbursement this Period: 3815.44

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC CC TRANSACTION FEES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 05 / 2016

FEC Identification Number: C
Transaction ID : SB21B.I1502
Amount of Each Disbursement this Period: 1214.11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11383.85

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1502i

Amount of Each Disbursement this Period

2169.82

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1503i

Amount of Each Disbursement this Period

1850.97

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1504

Amount of Each Disbursement this Period

1069.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5090.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1504!

Amount of Each Disbursement this Period

811.44

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1505!

Amount of Each Disbursement this Period

407.74

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2016

FEC Identification Number

C

Transaction ID : SB21B.I1506

Amount of Each Disbursement this Period

1617.22

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2836.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1507
Amount of Each Disbursement this Period
885.49

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I15084
Amount of Each Disbursement this Period
2281.79

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1511
Amount of Each Disbursement this Period
4854.64

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8021.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1512
Amount of Each Disbursement this Period
5184.61

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1512
Amount of Each Disbursement this Period
5151.12

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1513
Amount of Each Disbursement this Period
4402.87

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

14738.60

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1513
Amount of Each Disbursement this Period

3333.43

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1513
Amount of Each Disbursement this Period

669.19

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1513
Amount of Each Disbursement this Period

684.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4686.95

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1514'

Amount of Each Disbursement this Period

[REDACTED] 2363.30

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC WEB ADVERTISING AND DIGITAL CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I15143

Amount of Each Disbursement this Period

[REDACTED] 198852.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1514

Amount of Each Disbursement this Period

[REDACTED] 2925.89

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 204141.19

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1520
Amount of Each Disbursement this Period
2729.77

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1520
Amount of Each Disbursement this Period
6499.41

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1522
Amount of Each Disbursement this Period
8197.92

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

17427.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1525
Amount of Each Disbursement this Period
2009.40

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1525
Amount of Each Disbursement this Period
8911.22

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1528
Amount of Each Disbursement this Period
6134.16

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

17054.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1528f

Amount of Each Disbursement this Period

[REDACTED] 1791.33

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC LIST ACQUISITION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1531f

Amount of Each Disbursement this Period

[REDACTED] 106200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1533

Amount of Each Disbursement this Period

[REDACTED] 3823.83

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 111815.16

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1534I

Amount of Each Disbursement this Period

[REDACTED] 3755.47

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1536I

Amount of Each Disbursement this Period

[REDACTED] 1697.92

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1536I

Amount of Each Disbursement this Period

[REDACTED] 1676.29

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 7129.68

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1537!

Amount of Each Disbursement this Period

[REDACTED] 921.58

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1539!

Amount of Each Disbursement this Period

[REDACTED] 2902.38

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1545

Amount of Each Disbursement this Period

[REDACTED] 1212.37

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 5036.33

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1545
Amount of Each Disbursement this Period
3821.31

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1545
Amount of Each Disbursement this Period
4248.34

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1547
Amount of Each Disbursement this Period
4972.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

13042.17

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1554!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1555!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1556
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1556i
Amount of Each Disbursement this Period
9757.09

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC DIGITAL CONSULTING AND LIST RENTAL

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1564i
Amount of Each Disbursement this Period
532133.38

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I1565
Amount of Each Disbursement this Period
13336.91

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

555227.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1565f

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST. STE. 400

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1565f

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON ST

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I1495

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: **08 / 31 / 2016**

FEC Identification Number: **C**

Transaction ID : **SB21B.I1521I**

Amount of Each Disbursement this Period: **6781.56**

Memo Item

Full Name (Last, First, Middle Initial)
B. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type:

Date of Disbursement: **09 / 29 / 2016**

FEC Identification Number: **C**

Transaction ID : **SB21B.I1564I**

Amount of Each Disbursement this Period: **4335.80**

Memo Item

Full Name (Last, First, Middle Initial)
C. NRCC

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement JFC RENT AND PHONES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type:

Date of Disbursement: **09 / 15 / 2016**

FEC Identification Number: **C C00002931**

Transaction ID : **SB21B.I1539I**

Amount of Each Disbursement this Period: **16786.74**

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **27904.10**

TOTAL This Period (last page this line number only)..... ▶ **6639368.10**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

RYAN, PAUL, D, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2016

FEC Identification Number

C00330894

Transaction ID : SB22.I15021

Amount of Each Disbursement this Period

285422.23

Memo Item

Full Name (Last, First, Middle Initial)

B. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

RYAN, PAUL, D, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2016

FEC Identification Number

C00330894

Transaction ID : SB22.I15022

Amount of Each Disbursement this Period

94167.75

Memo Item

Full Name (Last, First, Middle Initial)

C. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

RYAN, PAUL, D, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C00330894

Transaction ID : SB22.I15291

Amount of Each Disbursement this Period

1092975.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1472565.97

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RYAN FOR CONGRESS

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

RYAN, PAUL, D, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

FEC Identification Number

C C00330894

Transaction ID : SB22.I15650

Amount of Each Disbursement this Period

516622.69

Memo Item

Full Name (Last, First, Middle Initial)

B. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2016

FEC Identification Number

C C00002931

Transaction ID : SB22.I15020

Amount of Each Disbursement this Period

1076868.04

Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2016

FEC Identification Number

C C00002931

Transaction ID : SB22.I15125

Amount of Each Disbursement this Period

128450.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1721941.71

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C C00002931

Transaction ID : SB22.I15294

Amount of Each Disbursement this Period

2049408.31

Memo Item

Full Name (Last, First, Middle Initial)

B. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (LEGAL PROCEEDINGS FUND)

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

FEC Identification Number

C C00002931

Transaction ID : SB22.I15295

Amount of Each Disbursement this Period

406570.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00002931

Transaction ID : SB22.I15652

Amount of Each Disbursement this Period

1255353.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3711331.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (BUILDING FUND)

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00002931

Transaction ID : SB22.I15653

Amount of Each Disbursement this Period

59171.99

Memo Item

Full Name (Last, First, Middle Initial)

B. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (LEGAL PROCEEDINGS FUND)

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00002931

Transaction ID : SB22.I15654

Amount of Each Disbursement this Period

559458.50

Memo Item

Full Name (Last, First, Middle Initial)

C. PROSPERITY ACTION, INC.

Mailing Address 320 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2016

FEC Identification Number

C C00377689

Transaction ID : SB22.I15023

Amount of Each Disbursement this Period

57227.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

675858.12

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. PROSPERITY ACTION, INC.

Mailing Address 320 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

C C00377689

Transaction ID : SB22.I15292

Amount of Each Disbursement this Period

124528.31

Memo Item

Full Name (Last, First, Middle Initial)

B. PROSPERITY ACTION, INC.

Mailing Address 320 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

FEC Identification Number

C C00377689

Transaction ID : SB22.I15651

Amount of Each Disbursement this Period

59107.70

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

183636.01

7765333.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. BOYLE, JOSEPH, , ,

Mailing Address 2228 SW 21ST AVE

City
PORTLAND

State
OR

Zip Code
97201

Purpose of Disbursement
REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1541
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CHARLESTON, JONATHAN, , ,

Mailing Address 132 GREAT OAKS

City
FAYETTEVILLE

State
NC

Zip Code
28203

Purpose of Disbursement
REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I15048
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. KAYNE, DANIEL, , ,

Mailing Address 123 S VIRGINIA LEE RD

City
COLUMBUS

State
OH

Zip Code
43209

Purpose of Disbursement
REFUND

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB28A.I1482
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MENTZER, DAVID, , ,

Mailing Address 4611 HAWTHORNE LANE NW

City
WASHINGTON

State
DC

Zip Code
20016

Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1514
Amount of Each Disbursement this Period
10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MERCER, DIANA, , ,

Mailing Address 600 ROUTE 25A

City
EAST SETAUKET

State
NY

Zip Code
11733

Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1559
Amount of Each Disbursement this Period
2700.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MERCER, ROBERT, , ,

Mailing Address 600 ROUTE 25A

City
EAST SETAUKET

State
NY

Zip Code
11733

Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1559
Amount of Each Disbursement this Period
2700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. RAUL, ALAN, , ,

Mailing Address 4921 QUEBEC ST

City
WASHINGTON

State
DC

Zip Code
20016

Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 15 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1479
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WILLIAMS, RYAN, , ,

Mailing Address 1826 JEFFERSON PL NW

City
WASHINGTON

State
DC

Zip Code
20036

Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 28 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1559€
Amount of Each Disbursement this Period
2250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. COURSON FAMILY OIL & GAS PARTNERSHIP

Mailing Address PO BOX 809

City
PERRYTON

State
TX

Zip Code
79070

Purpose of Disbursement
REFUND

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1557
Amount of Each Disbursement this Period
2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HOEKSTRA GLOBAL STRATEGIES LTD

Mailing Address 151 CENTRAL AVE STE 220

City
HOLLAND

State
MI

Zip Code
49423

Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1555!
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KELLER LOGGING CO

Mailing Address 4418 KELLER RD

City
ROSEBURG

State
OR

Zip Code
97470

Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1555!
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PRAIRIE PINES LTD

Mailing Address 1922 124TH ST

City
LUBBOCK

State
TX

Zip Code
79423

Purpose of Disbursement
REFUND

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB28A.I1557
Amount of Each Disbursement this Period
250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RGLBLAIR LLC

Full Name (Last, First, Middle Initial)

Mailing Address **7764 S ELM CT**

City **CENTENNIAL** State **CO** Zip Code **80122**

Purpose of Disbursement **REFUND** Category/Type **010**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: **09 / 23 / 2016**

FEC Identification Number: **C**

Transaction ID : SB28A.I1555;
Amount of Each Disbursement this Period: **500.00**

Memo Item

B. SCHWARZ PARTNERS

Full Name (Last, First, Middle Initial)

Mailing Address **3600 WOODVIEW TRACE STE 300**

City **INDIANAPOLIS** State **IN** Zip Code **46268**

Purpose of Disbursement **REFUND** Category/Type **010**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: **09 / 23 / 2016**

FEC Identification Number: **C**

Transaction ID : SB28A.I1556;
Amount of Each Disbursement this Period: **50000.00**

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	50500.00
TOTAL This Period (last page this line number only).....▶	87400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIENDS OF GREG HARTMANN

Full Name (Last, First, Middle Initial)
Mailing Address 3536 EDWARDS RD STE 201

City CINCINNATI State OH Zip Code 45208

Purpose of Disbursement REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB28C.I1499f

Amount of Each Disbursement this Period: 2500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00